USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

~~South east 1/4 of S E 1/4 South east 1/4~~

WATER WELL RECORD

KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Riley	~~of South West 1/4~~ 1/4 SE 1/4 SE 1/4	11	T 6 South S	R 6 east E/W

2. Distance and direction from nearest town or city: Randolph 7 north on 77 Hway + 1½ east

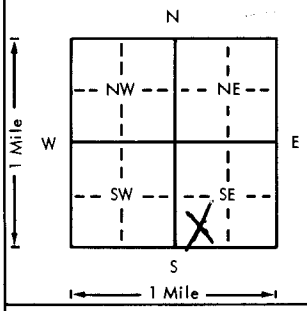
Street address of well location if in city: 7¼ north Randolph

3. Owner of well: Glen Raump

R.R. or street: RR1

City, state, zip code: Randolph Kans 66554

4. Locate with "X" in section below:



6. Bore hole dia. 10 in. Completion date 8-18-77

Well depth 40 ft.

7. X Cable tool __ Rotary __ Driven __ Dug __ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: X Domestic __ Public supply __ Industry __ Irrigation __ Air conditioning __ Stock __ Lawn __ Oil field water __ Other

9. Casing: Material PVC Height: (Above) or below

Threaded ___ Welded ___ Surface 20 in.

RMP ___ PVC X Weight 200 lbs. ft. RSC

Dia. 5 in. to 40 ft. depth Wall Thickness: inches or

Dia. ___ in. to ___ ft. depth gage No. 26 Wall

10. Screen: Manufacturer's name ~~Pumpee~~ M.P.I.

Type PVC Dia. 5

Slot/gauze 1050 Length 20'

Set between 20 ft. and 40 ft.

___ ft. and ___ ft.

Gravel pack? X Size range of material ⅛ X ¼

11. Static water level: 20 ft. below land surface Date 8-18-77 mo./day/yr.

12. Pumping level below land surfaces:

___ ft. after ___ hrs. pumping ___ g.p.m.

___ ft. after ___ hrs. pumping ___ g.p.m.

Estimated maximum yield 20 g.p.m.

13. Water sample submitted: mo./day/yr.

__ Yes X No Date NA

14. Well head completion:

__ Pitless adapter ___ Inches above grade

15. Well grouted? X

With: X Neat cement __ Bentonite X Concrete

Depth: From 15 ft. to 4 ft.

16. Nearest source of possible contamination: 200

ft. X Direction east Type Creek

Well disinfected upon completion? X Yes __ No

17. Pump: X Not installed

Manufacturer's name

Model number ___ HP ___ Volts ___

Length of drop pipe ___ ft. capacity ___ g.p.m.

Type:

__ Submersible __ Turbine

__ Jet __ Reciprocating

__ Centrifugal __ Other

5. Type and color of material

	From	To
top soil	0	5
Rock Lime	5	7
- clay	7	12
Rock Lime	12	20
Rock Blue	20	40

(Use a second sheet if needed)

18. Elevation:

Topography:

__ Hill

__ Slope

__ Upland

X Valley

19. Remarks:

20. Water well contractor's certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Strader Drilling Co 237

Business name License No.

Address Blue Rapids

Signed Harold Strader Date 8-18-77

Authorized representative

T 6 R 6 E/W Sec 11 1/4 SW 1/4 77 1/4 SESE

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

M1-1023