

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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

SW SE SE 16

1 Location of well:		County RILEY	Township name	Fraction SW SE SE	Section number	Town number 75	Range number 6E
Distance and direction from nearest town or city:		40 rods north of Randolph Kans + 50 rods E of 77 Highway		3 Owner of well: Carl Swenson Address: Randolph Kans			
Street address of well location if in city:		north side of 16 Highway					
Locate with "X" in section below:		Sketch map: My 77. E on 14, 1/2 mile N side Well is here 16 Highway Filling Station				4 Well depth: 178 ft. Date of completion Aug 16-75 Well diameter 9 in.	
2		Type and color of material		From	To	5 <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
3		Clay		0	30	6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well	
		limestone yellow		30	34	7 Casing: Material RMP Weight: (above) below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 19 in. Diam. Weight 160 lbs./ft. 5 in. to 178 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ___ in. to ___ ft. depth	
		white limestone		34	50	8 Screen: Jess + Lowell Manufacturer RMP Type Plastic Dia. 6 outside Slot/gauze 1/40 Length 40 Set between 30 ft. and 40 ft. Rings: 160 - 140 also Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/4 X 3/8	
		Blue Shale Rock		50	100	9 Static water level: 35 ft. below land surface Date Aug 16-75	
		Red Shale		100	123	10 Pumping level below land surfaces: 35 feet ___ ft. after ___ hrs. pumping ___ g.p.m. ___ ft. after ___ hrs. pumping ___ g.p.m. Estimated maximum yield 6 g.p.m.	
		Hard Blue Rock		123	132	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ___	
		Blue Shale		132	150	12 Well head completion: NA <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	
		Blue Limestone Harel		150	158	13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> ___ Depth: From 17 ft. to 6 ft.	
		Blue Shale		158	178	14 Nearest source of possible contamination: ft. 850 Direction South Type 170 ft. E V Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
						15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ___ HP ___ Volts ___ Model number ___ Length of drop pipe ___ ft. capacity ___ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
16 Remarks: elevation 1250		Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		(use a second sheet if needed)		17 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 Date 8-16-75 Authorized representative	

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5