

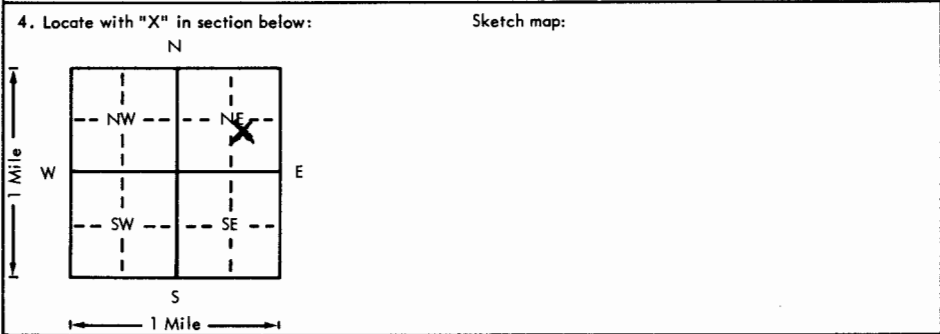
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 **Jefferson** Fraction **NE 1/4 SE 1/4 NE 1/4** Section number **26** Township number **T 8 S R 17 E/W**

2. Distance and direction from nearest town or city:
Street address of well location if in city:
3. Owner of well: **Heinen, Anthony J.**
R.R. or street: **Rt.**
City, state, zip code: **Valley Falls, Kansas**



6. Bore hole dia. **10** in. Completion date **3/30/76**
Well depth **75** ft.

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

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

Casing: Material **PVC** Height: Above or below
Threaded Welded Surface **24** in.
RMP PVC Weight **200** lbs./ft.
Dia. in. to ft. depth Well Thickness: inches or
Dia. in. to ft. depth Page No. _____

5. Type and color of material	From	To
Top Soil	0	3
Brown Clay	3	14
Yellow Clay	14	20
Yellow Clay with Big Gravel	20	23
Coarse Sand and Gravel	23	25
Blue Lime	25	26
Gray Shale	26	33
Blue Shale	33	71
Blue Lime	71	75
(Use a second sheet if needed)		

10. Screen: Manufacturer's name **Modern**
Pipe

Type **PVC** Dia. **5 inch**
Slot/gauze **7** Length **30 Feet**
Set between **25** ft. and **35** ft.
55 ft. and **75** ft.
Gravel pack? Yes No Size range of material **1/2**

11. Static water level: _____ mo./day/yr.
24 ft. below land surface Date **3/30/76**

12. Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield **6** g.p.m.

13. Water sample submitted: _____ mo./day/yr.
 Yes No Date _____

14. Well head completion:
 Pitless adapter _____ inches above grade

15. Well grouted? Yes
With: Neat cement Bentonite Concrete
Depth: From **2** ft. to **12** ft.

16. Nearest source of possible contamination:
ft. **80** Direction **South** type **Barn**
Well disinfected upon completion? Yes No

17. Pump: 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

18. Elevation: **823**
Topography:
 Hill
 Slope
 Upland
 Valley

19. Remarks: **Slab to installed by customer. He knows this is a regulation.**

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.
Cummins Drilling Co 148
Business name _____ License No. _____
Address **Rt 16 Topeka KS**
Signed **Jeanette Cummins** Date **4/21/76**
Authorized representative

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

Form WWC-5

BR = 148

T 8 S R 17 E/W
26
NE 1/4 SE 1/4 NE 1/4