

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

OK

Two map locations both of which are in the SE 1/4 SW 1/4

WATER WELL RECORD
KSA 82a-1201-1215

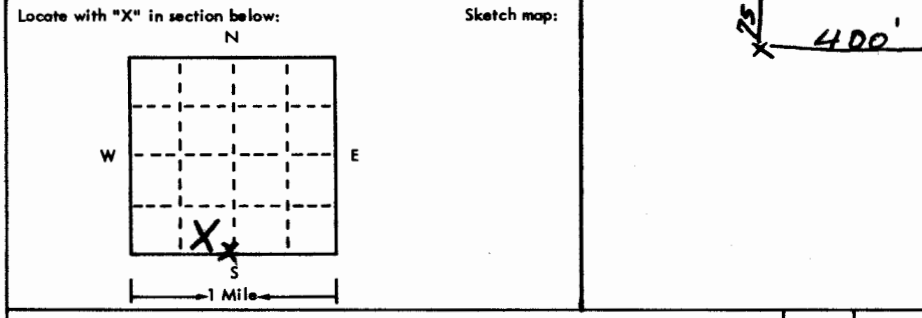
T R EW sec 1/4 1/4 1/4 No.

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

SE 1/4 SW 1/4 cdd

1 Location of well: County Jefferson Township name Jefferson Fraction SE 1/4 SW 1/4 Section number 21 Town number 8 Range number 19E

Distance and direction from nearest town or city: 1/2 N. - 1 3/4 W Street address of well location if in city: Winchester, KS. 3 Owner of well: C. W. Perry Address: RFD1 Winchester, KS



4 Well depth: 60 ft. Date of completion: 9-26-75
Well diameter 10 in.

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary

6 Use: Domestic Public supply Industry
 Irrigation Air conditioning Commercial
 Test well

7 Casing: Material PVC Height: above/below
Threaded Welded Surface 24 in.
Diam. 5 in. to 60 ft. depth Weight 233 lbs./ft.
Drive shoe? Yes No

2	Type and color of material	From	To
	Top Soil	0	2
	yellow clay	2	15
	yellow clay + sand	15	18
	yellow clay	18	30
	Fine sand	30	37
	yellow clay	37	41
	yellow clay + sand	41	43
	Grey sandy clay	43	49
	Grey Limestone	49	52
	Grey Shale	52	57
	Grey Limestone	57	59
	Grey Shale	59	60

8 Screen: Manufacturer Pump Co
Type PVC Dia. 5"
Slot/pipe 1025 Length 20
Set between 30 ft. and 50 ft.
Fittings: Gravel pack Yes No Size range of material #3

9 Static water level: NOT MEASURED
ft. below land surface Date _____

10 Pumping level below land surfaces: AIR TEST
ft. after _____ hrs. pumping _____ g.p.m.
ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield 4 g.p.m.

11 Water sample submitted:
 Yes No Date _____

12 Well head completion: CAPPED
 Pitless adapter 24 inches above grade

13 Well grouted? Yes No
 Neat cement Bentonite _____
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 100 Direction N Type LOT
Well disinfected upon completion? Yes No

15 Pump: Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.m.p.
Type:
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

16 Remarks: elevation 1820' 1120'?
Topography:
 Hill
 Slope
 Upland
 Valley
1116 Km

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 DRIG. CO INC 182
Business name License No. _____
Address RFD1 HOLTON KS.
Signed Dale Babson Date 9-28-75
Authorized representative

8 19E 21 SE 1/4 SW 1/4

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

Form WWC-5

RR 1067

11-20-75
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