

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 CLAY	Fraction NE 1/4 NE 1/4 NE 1/4	Section number 11	Township number T 8 S R 2 E/W										
2. Distance and direction from nearest town or city: Street address of well location if in city: CLAY CENTER			3. Owner of well: HERBERT KARMAUN R.R. or street: RR #1 City, state, zip code: CLAY CENTER KANS 67432												
4. Locate with "X" in section below:		Sketch map:													
		6. Bore hole dia. <u>8</u> in. Completion date <u>7-28-77</u> Well depth <u>60</u> ft.													
5. Type and color of material		From		To											
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">TOPSOIL</td> <td style="width: 25%;">0</td> <td style="width: 25%;">3</td> </tr> <tr> <td>BROWN CLAY</td> <td>3</td> <td>18</td> </tr> <tr> <td>GRAVEL</td> <td>18</td> <td>60</td> </tr> <tr> <td>STOP</td> <td>60</td> <td></td> </tr> </table>		TOPSOIL	0	3	BROWN CLAY	3	18	GRAVEL	18	60	STOP	60	
TOPSOIL	0	3													
BROWN CLAY	3	18													
GRAVEL	18	60													
STOP	60														
		8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other													
		9. Casing: Material <u>PVC</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>3</u> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>1255</u>													
		10. Screen: Manufacturer's name <u>PUMCO</u> Type <u>PVC</u> Dia. <u>5</u> Slot/gauze <u>1/16</u> Length <u>20'</u> Set between <u>40</u> ft. and <u>60</u> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u> </u>													
		11. Static water level: <u>30</u> ft. below land surface Date <u>7-28-77</u> mo./day/yr.													
		12. Pumping level below land surfaces: <u> </u> ft. after <u>1 hr.</u> pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>50</u> g.p.m.													
		13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>													
		14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade													
		15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input checked="" type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.													
		16. Nearest source of possible contamination: <u>SEPTIC</u> ft. <u>60</u> Direction <u>WEST</u> Type <u>TANK</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No													
		17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> g.p.m. 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													
		(Use a second sheet if needed)													
18. Elevation:		19. Remarks:													
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		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. <u>GEOLAK & SONS INC. 258</u> Business name License No. <u> </u> Address <u>CLAYTON KANS 66937</u> Signed <u> </u> Date <u>7-28-77</u> Authorized representative													

S
 R
 2
 E/W
 Sec
 11
 NE
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 NE
 1/4
 NE
 1/4

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