

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 SW 1/4 SE 1/4 SW 1/4	Section number 13	Township number T 8 S R	Range number 2 EW				
2. Distance and direction from nearest town or city: 1 S - 1 W			3. Owner of well: GLEN CARLSON						
Street address of well location if in city: CLAY CENTER			R.R. or street: RR #5						
			City, state, zip code: CLAY CENTER, KANS						
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 8 in. Completion date 12/29/76					
<div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;">NW</td><td style="width: 20px; height: 20px;">NE</td></tr> <tr><td style="width: 20px; height: 20px;">SW</td><td style="width: 20px; height: 20px;">SE</td></tr> </table> <div style="text-align: center;">S</div> <p style="text-align: center;">1 Mile</p>		NW	NE	SW	SE			Well depth 90 ft.	
NW	NE								
SW	SE								
				7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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					
				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 PVC Height Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 3 lbs./ft. Dia. 5 in. to 90 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. ---					
5. Type and color of material		From	To	10. Screen: Manufacturer's name 1238					
TOPSOIL		0	2	PUMPCO					
BROWN CLAY		2	7	Type PVC Dia. 5 1/2					
GRAY CLAY		7	22	Slot gauge 1/16 Length 20'					
BROWN CLAY		22	36	Set between 90 ft. and 90 ft.					
GRAY CLAY		36	72	Gravel pack? YES Size range of material 5 X 1/4					
LIMESTONE		72	90	11. Static water level: 60 ft. below land surface Date 12/29/76					
STOP		90		12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 50 g.p.m.					
				13. Water sample submitted: ____ Yes <input checked="" type="checkbox"/> No Date					
				14. Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade					
				15. Well grouted? YES With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 13 ft.					
				16. Nearest source of possible contamination: SEPTIC ft. 75 Direction EAST Type TANK Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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:		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. Geolax & Sons Inc 258 Business name License No. 46937 Address ELLIOTTON KANS Signed David P. ... Date 12/29/76 Authorized representative						
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley									

T 8
R 2
W 2
Sec 13 SW SE SW
1/4 1/4 1/4

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