

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 <u>Clay</u> Fraction <u>NW 1/4 NE 1/4 NE 1/4</u> Section number <u>7</u> Township number <u>T 8 S R</u> Range number <u>3 E E/W</u>	
2. Distance and direction from nearest town or city: <u>in city</u> Street address of well location if in city: <u>South West hart</u>	
3. Owner of well: <u>S Sheldon Bergstrom</u> R.R. or street: <u>503 West court</u> City, state, zip code: <u>Clay Center KS</u>	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole dia. <u>1 1/2</u> in. Completion date <u>7-29-78</u> Well depth <u>60</u> ft.	
7. <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	
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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material <u>STEEL</u> Height: <u>12</u> in. Above or below Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>7</u> lbs./ft. Dia. <u>7</u> in. to <u>50</u> ft. depth Wall Thickness: <u>3/8</u> inches or Dia. <u>5.0</u> in. to <u>60</u> ft. depth gage No. <u>267</u> Wall	
5. Type and color of material	
	From To
<u>Top Soil, Black</u>	<u>0 15</u>
<u>Clay, sticky yellow</u>	<u>15 28</u>
<u>Sand, fine</u>	<u>28 40</u>
<u>Sand/gravel, yellow</u>	<u>40 50</u>
<u>Shale, Blue</u>	<u>50 60</u>
10. Screen: Manufacturer's name <u>M.P.I.</u> Type <u>PVC</u> Dia. <u>5</u> Slot/gauge <u>0.40</u> Length <u>30</u> Set between <u>40</u> ft. and <u>60</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 to 1/2</u>	
11. Static water level: <u>30</u> ft. below land surface Date <u>7-29-78</u> mo./day/yr.	
12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>30</u> g.p.m.	
13. Water sample submitted: <u>NA</u> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date	
14. Well head completion: <u>NA</u> <input type="checkbox"/> Pitless adapter ____ inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> <u>1-2</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>15</u> ft. to <u>5</u> ft.	
16. Nearest source of possible contamination: <u>130</u> ft. Direction <u>SOUTH</u> Type <u>Refuse fill</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 _____ 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	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. <u>Strader Drilling Co 23</u> Business name <u>Blue Rapids</u> License No. _____ Address _____ Signed <u>Harold Strader</u> Date <u>7-29-78</u> Authorized representative	

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