

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

8 SE 13 0 E
T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

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

SE SW NE 29

1 Location of well:	County Riley	Township name Bala	Fraction S.E. 1/4	Section number 13	Town number 8	Range number 5E	
Distance and direction from nearest town or city: 3 mi. N-1-East of Riley Ks.			3 Owner of well: L. + M. Jahnske Address: Leonardville Kans				
Locate with "X" in section below: N W ——— X ——— E S 1 Mile			Sketch map: 			4 Well depth: 125 ft. Date of completion 9-23-75 Well diameter 5 in.	
			5 <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		6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>		
			7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. Diam. Cement Weight 200 lbs./ft. 125 5 in. to 125 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth		8 Screen: Manufacturer Pumpco Type PVC PIST. Dia. 5" Slot/gauze 100 Length 30' Set between 80 ft. and 115 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material _____		
2 Type and color of material			From	To	9 Static water level: 70 ft. below land surface Date 9-23-75		
Brown Clay			0	20'	10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 20 g.p.m. Bailer Test		
Lime Rock-Yellow			20	25	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
Yellow Limy Clay			25	40	12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
Gray Clay			40	50	13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 20 ft.		
Brown Clay-Shaley + Silty			50	65	14 Nearest source of possible contamination: Live Stack ft. 100 Direction N.E. Type Stack Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Lime Rock-Porus			65	80	15 Pump: <input 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		
Blue Shale			80	90			
Lime Rock yellow			90	100			
Brown Clay-Silty			100	120			
Blue Shale			120	125			
16 Remarks: elevation 1304 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			(use o second sheet if needed)		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. Harpers Drlg. Service Business Name License No. _____ Address Blue Rapids 176 Signed G. S. Harper Date 9-23-75 Authorized representative		

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

Form WWC-5