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

WATER WELL RECORD
KSA 82a-1201-1215

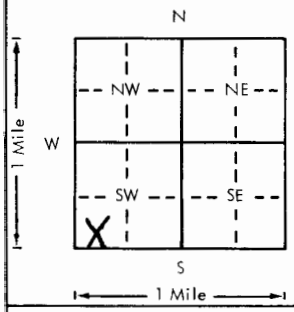
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Pottawatomie	SW 1/4 SW 1/4 SW 1/4	21	T 9 (S)	R 10 (E) W

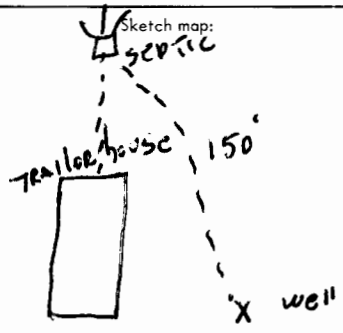
2. Distance and direction from nearest town or city: IN
Street address of well location if in city: Louisville

3. Owner of well: Tom Picolet
R.R. or street: RR
City, state, zip code: Louisville, Ks. 66450

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 12 in. Completion date
Well depth 55 ft. 10-9-78

7. __ Cable tool ✓ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: ✓ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PVC | Height: Above or below
Threaded ___ Welded ___ | Surface 24 in.
RMP ___ PVC 9L | Weight 2.58 lbs./ft.
Dia. 5 in. to 55 ft. depth | Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth | gage No. .279

5. Type and color of material	From	To
Top Soil	0	5
Clay, Blue	5	49
Fine Sand-Course Sand, gravel	49	55

(Use a second sheet if needed)

10. Screen: Manufacturer's name
PumpCO MPI
Type PVC Dia. 5
Slot/gauze #020 Length 10
Set between 45 ft. and 55 ft.
___ ft. and ___ ft.
Gravel pack? ✓ Size range of material: #30X.060

11. Static water level: mo./day/yr.
30 ft. below land surface Date 10-9-78

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 30 g.p.m.

13. Water sample submitted: mo./day/yr.
___ Yes ✓ No Date

14. Well head completion: Cap
___ Pitless adapter 24 Inches above grade

15. Well grouted? ✓
With: ✓ Neat cement ___ Bentonite ___ Concrete
Depth: From 5 ft. to 15 ft.

16. Nearest source of possible contamination:
ft. 150 Direction W Type Septic
Well disinfected upon completion? ✓ Yes ___ No

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

18. Elevation:

Topography:
___ Hill
___ Slope
___ Upland
✓ Valley

19. Remarks:
OWNER TO INSTALL SLAB

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.
Strader Drlg Co 182
Business name License No.
Address RT 1 Holton, Ks
Signed Dale Strader Date 10-6-78
Authorized representative

T 9 R 10 (E) W Sec 21 1/4 SW 1/4 SW 1/4 SW 1/4

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

Form WWC-5