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

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 NW SW

1 Location of well: County	Township name	Fraction	Section number	Town number	Range number
Pottawatomie	Louisville	~~Nw 1/4 Sw 1/4~~	25	9	10E

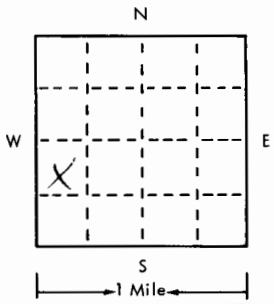
Distance and direction from nearest town or city: 2 N

Street address of well location if in city: Wamego, Ks

3 Owner of well: Ed Yeager

Address: RR 1 Wamego, Ks

Locate with "X" in section below:



Sketch map:

4 Well depth: 78 ft. Date of completion 7-8-75
Well diameter 10 in.

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐

7 Casing: Material PVC Height: above/~~below~~
Threaded ☐ Welded ☐ Surface 24 in.
Diam. 5 in. to 78 ft. depth Weight 2.33 lbs./ft.
___ in. to ___ ft. depth Drive shoe? ☐ Yes ☒ No

2 Type and color of material	From	To
Top Soil	0	4
Yellow Clay	4	40
Fine Sand	40	44
Coarse sand to Pea gravel	44	55
Blue Shale	55	78
(use a second sheet if needed)		

8 Screen:
Manufacturer Pump Co
Type PVC Dia. 5"
Slot/~~gauge~~ .025 Length 10'
Set between 48 ft. and 58 ft.
Fittings:
Gravel pack ☒ Yes ☐ No Size range of material #3

9 Static water level: Not Measured
___ ft. below land surface Date ___

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

11 Water sample submitted:
☐ Yes ☒ No Date ___

12 Well head completion: Capped
☐ Pitless adapter 24 ☒ Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ ___
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 100 Direction S.E Type S. Tank
Well disinfected upon completion? ☒ Yes ☐ No

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

16 Remarks: elevation
1042

Topography:
☐ Hill
☒ Slope
☐ Upland
☐ Valley

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.
Strader Drilling Co Inc 182
Business name License No.
Address RED 1 Holton Kansas 66436
Signed Dale Ashcraft Date 7-12-75
Authorized representative

9 10E 28 SE NW SW

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

Form WWC-5