

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>POITAWATOMIE</u>	Fraction <u>SW 1/4 SW 1/4 SW 1/4</u>	Section number <u>4</u>	Township number <u>T 9 S</u>	Range number <u>R 12 E/W</u>
2. Distance and direction from nearest town or city: <u>1 S 1 W</u>			3. Owner of well: <u>ROY SMITH</u>			
Street address of well location if in city: <u>OF EMMETT</u>			R.R. or street: <u>516 W. PALMER</u>			
			City, state, zip code: <u>ST. MARYS, KS. 66536</u>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date _____		
				Well depth <u>85</u> ft. <u>4-28-78</u>		
				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		
5. Type and color of material				From	To	9. Casing: Material <u>PVC</u> Height <u>(Above)</u> or below
<u>TOP SOIL</u>				<u>0</u>	<u>6</u>	Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in.
<u>CLAY, BROWN</u>				<u>6</u>	<u>38</u>	RMP <u>PVC 96</u> Weight <u>3.58</u> lbs./ft.
<u>SHALE, GRAY</u>				<u>38</u>	<u>49</u>	Dia. <u>5</u> in. to <u>85</u> ft. depth Wall Thickness: inches or
<u>LIMESTONE, GRAY</u>				<u>49</u>	<u>65</u>	Dia. _____ in. to _____ ft. depth gage No. <u>274</u>
<u>LIMESTONE, SOFT, BROWN</u>				<u>65</u>	<u>73</u>	10. Screen: Manufacturer's name <u>PUMPER MP</u>
<u>SHALE, GRAY</u>				<u>73</u>	<u>85</u>	Type <u>PVC</u> Dia. <u>5</u>
						Slot/gauze <u>0.20</u> Length <u>20</u>
						Set between <u>65</u> ft. and <u>85</u> ft.
						ft. and _____ ft.
						Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>0.30-0.50</u>
						11. Static water level: _____ mo./day/yr.
						<u>60</u> ft. below land surface Date <u>4-28-78</u>
						12. Pumping level below land surfaces:
						_____ ft. after _____ hrs. pumping _____ g.p.m.
						_____ ft. after _____ hrs. pumping _____ g.p.m.
						Estimated maximum yield <u>15</u> g.p.m.
						13. Water sample submitted: _____ mo./day/yr.
						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
						14. Well head completion: <u>CAP</u>
						<input type="checkbox"/> Pitless adapter <u>24</u> Inches above grade
						15. Well grouted? <input checked="" type="checkbox"/>
						With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete
						Depth: From <u>5</u> ft. to <u>15</u> ft.
						16. Nearest source of possible contamination:
						ft. <u>100</u> Direction <u>W</u> Type <u>CREEK</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
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography:		<u>OWNER TO INSTALL SLAB</u>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
<input type="checkbox"/> Hill				<u>STRADER Dalg Co Inc 182</u>		
<input checked="" type="checkbox"/> Slope				Business name _____ License No. _____		
<input type="checkbox"/> Upland				Address <u>RT1 HOLTON KS</u>		
<input type="checkbox"/> Valley				Signed <u>Dale Adams</u> Date <u>5-1-78</u>		
				Authorized representative		