

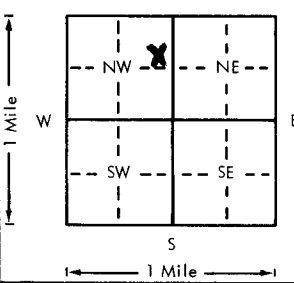
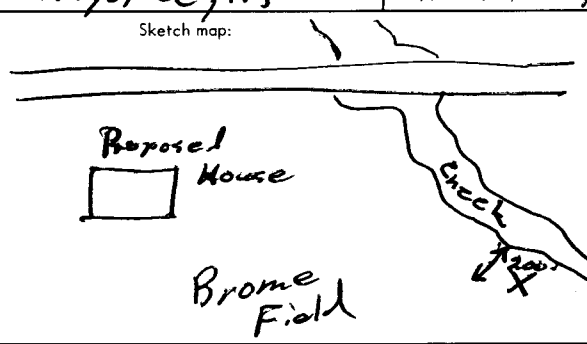
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USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

bad

1. Location of well:	County <b>Jackson</b>	Fraction <b>SE 1/4 NE 1/4 NW 1/4</b>	Section number <b>4</b>	Township number <b>T 9 S R 15</b>	Range number <b>15</b>
2. Distance and direction from nearest town or city: <b>25 1/2 W</b>	3. Owner of well: <b>Leo Kessler</b>		R.R. or street: <b>2645 E. 25th</b>		
Street address of well location if in city: <b>Mayetta, Ks</b>		City, state, zip code: <b>Topeka, Kansas 66605</b>			
4. Locate with "X" in section below:	Sketch map:		6. Bore hole dia. <b>8"</b> in. Completion date <b>7-5-78</b>		
			Well depth <b>80</b> ft.		
5. Type and color of material			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		
Top Soil			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		
Black Silt			9. Casing: Material <b>PRC</b> Height <b>Above</b> or below Threading <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>24</b> in. RMP <input type="checkbox"/> PV <b>blue</b> Weight <b>2.74</b> lbs./ft. Dia. <b>5"</b> in. to <b>20</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>258</b>		
Brown Sandy Clay			10. Screen: Manufacturer's name <b>Pumped</b> Type <b>PRC</b> Dia. <b>5"</b> Slot gauge <b>020</b> Length <b>20' 10"</b> Set between <b>15</b> ft. and <b>25</b> ft. ft. and <input type="checkbox"/> ft.		
Yellow Sandy Cherty Gravel			11. Static water level: <input type="checkbox"/> mo./day/yr. <b>16</b> ft. below land surface Date <b>7-5-78</b>		
Gray Shale			12. Pumping level below land surfaces: <b>1 1/2 test</b> <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>10</b> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: <b>Top cap</b> <input type="checkbox"/> Pitless adapter <b>24</b> Inches above grade		
			15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
			16. Nearest source of possible contamination: ft. <b>200</b> Direction <b>West</b> Type <b>Creek</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <b>JACUZZI</b> Model number <b>554B</b> HP <b>1/2</b> Volts <b>230</b> Length of drop pipe <b>60</b> ft. capacity <b>10</b> g.p.m. Type: <input checked="" 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: <b>1085</b> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	19. Remarks: <b>DWARREN to install slab</b> <b>Rm</b>		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. <b>STRADER DRUG CO 182</b> Business name License No. Address <b>RT1 HOLTON</b> Signed <b>Dale Peskun</b> Date <b>7-7-78</b> Authorized representative		

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