

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

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|---|--|
| 1. Location of well: County: <u>Leavenworth</u> Fraction: <u>S 21 1/4 N 21 1/4 E 33 1/4</u> Section number: <u>33</u> Township number: T <u>9</u> S R <u>21</u> <u>EN</u> | |
| 2. Distance and direction from nearest town or city: <u>1 W 1 1/2 N</u> Street address of well location if in city: <u>Jarbo Jarboto</u> | |
| 3. Owner of well: <u>Ed Godsey</u> R.R. or street: <u>R#1 Box 162 BC</u> City, state, zip code: <u>Leavenworth</u> | |
| 4. Locate with "X" in section below: Sketch map: | |
| 5. Type and color of material | |
| Top Soil | From 0 To 3 |
| Brown Clay | 3 51 |
| Gray Clay | 51 62 |
| Gray Sandy Gravelly Clay | 62 71 |
| Gray Shaley Sandstone | 71 78 |
| 6. Bore hole dia. <u>5</u> in. Completion date <u>7-25-77</u> Well depth <u>78</u> ft. | |
| 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 | |
| 9. Casing: Material <u>PVC</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. RMP <u>PVC</u> Weight <u>2.74</u> lbs./ft. Dia. <u>5</u> in. to <u>78</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth Gauge No. <u>258</u> | |
| 10. Screen: Manufacturer's name <u>Pumpe</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>020</u> Length <u>20</u> Set between <u>58</u> ft. and <u>78</u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <u>Yes</u> Size range of material <u>20/60</u> | |
| 11. Static water level: <u>50</u> ft. below land surface Date <u>7-25-77</u> mo./day/yr. | |
| 12. Pumping level below land surfaces: <u>1 1/2</u> test <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>10</u> g.p.m. | |
| 13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u> | |
| 14. Well head completion: <u>Topcap</u> <input type="checkbox"/> Pitless adapter <u>24</u> Inches above grade | |
| 15. Well grouted? <u>Yes</u> 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. <u>5-15</u> | |
| 16. Nearest source of possible contamination: ft. <u>300</u> Direction <u>NE</u> Type <u>Pond</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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 | |
| (Use a second sheet if needed) | |
| 18. Elevation: <u>839</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | 19. Remarks: <u>Owner will construct Cement Slab around well</u> |
| 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. <u>STRADER DRIG CO INC 182</u> Business name License No. Address <u>Holtan, KS</u> Signed <u>Dale Ashen</u> Date <u>7/27/77</u> Authorized representative | |

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

Form WWC-5

BR Elev = 839
▽ = 860

-9 210 33 SE NW SW 1/4 1/4 1/4