

286

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

1 Location of well:		County Leavenworth	Township name SW 1/4 SW 1/4 NW 1/4	Fraction 1	Section number 9 S	Town number 21 E	Range number
Distance and direction from nearest town or city: 4 W. OF				3 Owner of well: William E. Keys			
Street address of well location if in city: Leavenworth				Address: RFD 3 Leavenworth, Kansas 66048			
Locate with "X" in section below:		Sketch map:		4 Well depth: 100 ft. Date of completion _____ Well diameter 10 in. OCT-4-79			
				5 <input 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			
2 Type and color of material				6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>			
TOP SOIL		From 0 To 3		7 Casing: Material PVC Height: above below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 29 in. Diam. _____ Weight 282 lbs./ft. 290 5 in. to 100 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth			
CLAY		From 3 To 28		8 Screen: Manufacturer Pumpco Type PVC Dia. 5 <input checked="" type="checkbox"/> 16 gauge 1020 Length 20 Set between 20 ft. and 40 ft. Fittings: _____ 1030x060 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____			
COURSE SAND, GRAVEL, WATER BEARING		From 28 To 30		9 Static water level: 29 ft. below land surface Date 10-9-79			
SHALE, GREY		From 30 To 100		10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 20 g.p.m.			
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
				12 Well head completion: CAP <input type="checkbox"/> Pitless adapter 29 <input type="checkbox"/> Inches above grade			
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 0 ft. to 10 ft.			
				14 Nearest source of possible contamination: ft. 100 Direction S Type SEPTIC Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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			
16 Remarks: elevation 1110 Topography: OWNER TO INSTALL SLAB <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> 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 Holtan, KS Signed Dale Baker Date 10-9-79 Authorized representative			

9 21E 1 SW 1/4 NW 1/4

CF