

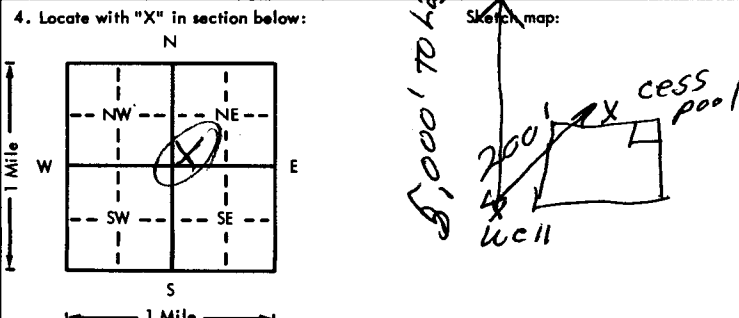
I

Sent to Leonard
7/1/77

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>Russell</u> Fraction <u>SW</u> Section number <u>23</u> Township number <u>T 13 S</u> Range number <u>R 11</u>	
2. Distance and direction from nearest town or city: <u>6 3/4 mi. NW.</u> 3. Owner of well: <u>KANSAS PARK & RESOURCES AUTHORITY</u> Street address of well location if in city: <u>Wilson, Kan.</u> R.R. or street: <u>P.O. Box 977</u> City, state, zip code: <u>Topeka, KS. 66601</u>	
4. Locate with "X" in section below: 	
5. Type and color of material	
CLAY	From 0 To 4
SANDSTONE	4 6
SANDY CLAY	6 12
CLAY	12 16
SANDY CLAY	16 20
Blue CLAY	20 31
Blue CLAY & SANDY CLAY	31 37
SANDSTONE	37 40
Blue mud	40 50
BROWN CLAY	50 55
White CLAY	55 58
SANDSTONE	58 61
Grey CLAY	61 69
CLAY STRIPS BROWN SANDSTONE	69 73
Grey CLAY	73 77
SANDY CLAY	77 79
SANDSTONE (Use a second sheet if needed)	79 82
6. Bore hole dia. <u>18</u> in. Completion date <u>6-27-77</u> Well depth <u>140</u> ft.	7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary
8. Use: <input type="checkbox"/> Domestic <input checked="" 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 <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <u>910</u> Surface <u>24</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>3.5</u> lbs./ft. Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>316</u>
10. Screen: Manufacturer's name <u>Hand</u> <u>Sawed Head</u> Size <u>5/16</u> Type <u>PVC</u> Dia. <u>6</u> Slot/gauze <u>5/16</u> Length <u>20'</u> Set between <u>126</u> ft. and <u>146</u> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <u>yes</u> Size range of material <u>3/4</u>	11. Static water level: <u>75</u> ft. below land surface Date <u>6-27-77</u> mo./day/yr.
12. Pumping level below land surfaces: <u>93</u> ft. after <u>4</u> hrs. pumping <u>110</u> g.p.m. <u>93</u> ft. after <u>6</u> hrs. pumping <u>116</u> g.p.m. Estimated maximum yield <u>210</u> g.p.m.	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date
14. Well head completion: <u>Park Authority, 0055</u> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>5</u> ft. to <u>47</u> ft.
16. Nearest source of possible contamination: <u>cess</u> ft. <u>260'</u> Direction <u>NE</u> Type <u>pool</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 _____ HP _____ Volts _____ Model number _____ 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: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>Park Authority to complete well to EPA standards</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>DEL Drilling Co 303</u> Business name _____ License No. _____ Address <u>368 Hill City, KS. 67642</u> Signed <u>Allen [Signature]</u> Date <u>6/28/77</u> Authorized representative	

13 1 10 2 3 SW NE NE
T R Sec 1/4 1/4 1/4

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

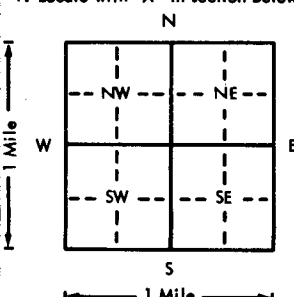
Form WWC-5

II

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 LINCOLN	Fraction SW 1/4 NE 1/4 NE 1/4	Section number 23	Township number T 13 S	Range number S R 11 E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well: KANSAS PARK & RESOURCES AUTHORITY R.R. or street: P.O. BOX 977 City, state, zip code: TOPEKA, KS, 66601		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. _____ in. Completion date _____ Well depth _____ ft.		
CONTINUATION FROM SHEET I				7. <input type="checkbox"/> Cable tool <input 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 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				9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
SANDSTONE & Grey clay				From	To	10. Screen: Manufacturer's name _____
SAND & white clay				93	95	Type _____ Dia. _____
GRAY CLAY				95	97	Slot/gauze _____ Length _____
BROWN SANDSTONE & CLAY				97	104	Set between _____ ft. and _____ ft.
SANDY CLAY				104	114	_____ ft. and _____ ft.
FINE SAND & SANDY CLAY				114	121	Gravel pack? _____ Size range of material _____
SAND & some clay				121	135	11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____
SANDY CLAY & Grey clay				135	138	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
White clay				138	140	13. Water sample submitted: _____ mo./day/yr. Yes _____ No _____ Date _____
(Use a second sheet if needed)				14. Well head completion: _____ Pitless adapter _____ Inches above grade		
				15. Well grouted? _____ With: _____ Neat cement _____ Bentonite _____ Concrete Depth: From _____ ft. to _____ ft.		
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? _____ Yes _____ No		
				17. Pump: _____ 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: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. D & L DRILLING CO 303 Business name License No. _____ Address Hill City, KS, 67642 Signed _____ Date 6/27/77 Authorized representative			

L3 110 23 SW NE NE
1/4 1/4 1/4

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

Form WWC-5