

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>Saline</u>	Fraction <u>NW 1/4 SW 1/4 SW 1/4</u>	Section number <u>32</u>	Township number T <u>13</u> S R <u>2W</u> E/W	Range number
2. Distance and direction from nearest town or city: <u>1 M. E Salina</u>			3. Owner of well: <u>US Geological Survey</u>		
Street address of well location if in city:			R.R. or street: <u>University of Kansas</u>		
			City, state, zip code: <u>Lawrence, Kans 66045</u>		
4. Locate with "X" in section below:				Sketch map:	
				<u>Well No 2, 40 ft N. of No. 1</u>	
5. Type and color of material			From	To	
<u>Alluvium:</u>					
<u>Clay, silty, gray-brown</u>			<u>0</u>	<u>15</u>	
<u>Gravel, fine to coarse &amp; sand</u>			<u>15</u>	<u>66.5</u>	
<u>Wellington formation:</u>					
<u>Shale, blue-gray, red-brown &amp; light gray;</u>					
<u>(interbedded with <sup>dolomite</sup> anhydrite, some gypsum)</u>			<u>66.5</u>	<u>135.7</u>	
<u>Anhydrite, hard (Mud loss in cavity)</u>			<u>135.7</u>	<u>136</u>	
6. Bore hole dia. <u>11 1/2</u> in. Completion date _____					
Well depth <u>136 1/2</u> ft. <u>6/15/79</u>					
7. <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					
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 checked="" type="checkbox"/> Other					
9. Casing: Material _____ Height: <u>Above</u> or below					
Threaded _____ Welded _____ Surface <u>12</u> in.					
RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft.					
Dia. <u>5</u> in. to <u>66</u> ft. depth Well Thickness: inches or					
Dia. <u>4</u> in. to <u>136</u> ft. depth gage No. <u>200</u>					
10. Screen: Manufacturer's name <u>Jess &amp; Lowell</u>					
Type <u>slots</u> Dia. <u>4"</u>					
Slot/gauze <u>1/10"</u> Length <u>30'</u>					
Set between <u>106</u> ft. and <u>136</u> ft.					
_____ ft. and _____ ft.					
Gravel pack? <u>3/8</u> Size range of material <u>3/8"</u>					
11. Static water level: _____ mo./day/yr.					
<u>14</u> ft. below land surface Date <u>6/15/79</u>					
12. Pumping level below land surfaces:					
<u>ND</u> ft. after <u>1/4</u> hrs. pumping <u>60</u> g.p.m.					
_____ ft. after _____ hrs. pumping _____ g.p.m.					
Estimated maximum yield <u>150</u> g.p.m.					
13. Water sample submitted: _____ mo./day/yr.					
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____					
14. Well head completion:					
<input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade					
15. Well grouted? <u>Y</u>					
With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete					
Depth: From <u>0</u> ft. to <u>90</u> ft.					
16. Nearest source of possible contamination:					
ft. <u>ND</u> Direction _____ Type _____					
Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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					
(Use a second sheet if needed)					
18. Elevation:		19. Remarks:		20. Water well contractor's certification:	
Topography:		<u>Set 68' 2" of 8" steel casing</u>		This well was drilled under my jurisdiction and this report	
<input type="checkbox"/> Hill		<u>Yields high chloride water</u>		is true to the best of my knowledge and belief.	
<input type="checkbox"/> Slope		<u>US GS Obsv. well</u>		<u>Hydraulic Drilling Co 126</u>	
<input type="checkbox"/> Upland				Business name _____ License No. _____	
<input checked="" type="checkbox"/> Valley				Address <u>Saline, Kansas</u>	
				Signed <u>Ol Faust</u> Date <u>6/29/79</u>	
				Authorized representative	

13-20-32 NW 1/4 SW 1/4

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

Form WWC-5