

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

RUSSEL SPRINGS ZONE

WATER WELL RECORD  
KSA 82a-1201-1215

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

DEC

well #1

1. Location of well:		County Logan	Fraction SW $\frac{1}{4}$ SW $\frac{1}{4}$ SE $\frac{1}{4}$	Section number 15	Township number T 13 S R 36	Range number E 1
2. Distance and direction from nearest town or city: 17 miles SW of Winona, Kansas Street address of well location if in city:				3. Owner of well: Robert N. Lowe R.R. or street: Box 333 City, state, zip code: Winona, Kansas 67764		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. 12 in. Completion date _____ Well depth 31 ft. 4-2-77		
5. Type and color of material		From	To	7. 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		0	3	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		
Sand		3	28	9. Casing: Material <u>plst</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>15</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>10</u> in. to <u>31</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>1/2"</u>		
Shale		28	31	10. Screen: Manufacturer's name <u>Jandl</u> Type <u>RMP</u> Dia. <u>10 1/8"</u> Slot/gauze <u>1/8"</u> Length <u>16</u> ft. <span style="float: right;">mnc</span> Set between <u>15</u> ft. and <u>31</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>3/8"</u>		
BROCK 28'				11. Static water level: _____ mo./day/yr. <u>15</u> ft. below land surface Date <u>4-2-77</u>		
				12. Pumping level below land surfaces: _____ ft. after <u>NA</u> hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
				14. Well head completion: <u>no</u> Pitless adapter _____ inches above grade		
				15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>4</u> ft. to <u>10</u> ft. <u>O.K.</u>		
				16. Nearest source of possible contamination: ft. _____ Direction <u>none</u> Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Remarks: <u>2980 (TUPO)</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>Bartell Drilling 139</u> Business name _____ License No. _____ Address <u>Winona, Kansas 67764</u> Signed <u>Jay Bartel</u> Date <u>5/1/77</u> Justified representative		

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

Form WWC-5