

SHARON SPRINGS EAST

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

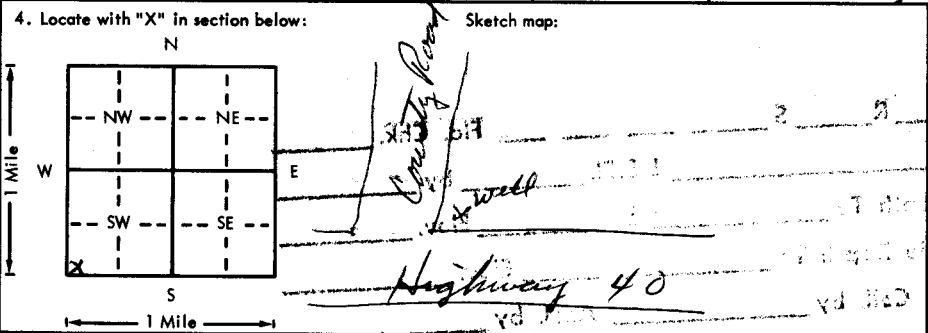
WATER WELL RECORD
KSA 82a-1201-1215

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

CCC

1. Location of well: County Wallace Fraction SW 1/4 SW 1/4 SW 1/4 Section number 20 Township number T 63 S R 39 E Range number 39

2. Distance and direction from nearest town or city: 4 miles east of Sharon Springs
Street address of well location if in city: Sharon Springs, Kansas
3. Owner of well: Dale Radul
R.R. or street: _____
City, state, zip code: Sharon Springs, Kans 67959



6. Bore hole dia. 3 1/2 in. Completion date 9-1-75
Well depth 41 ft.

7. Cable tool Rotary Driven Dug
Molloy rod Jetted Bored Reverse rotary

8. User: Domestic Public supply Industry Irrigation Air conditioning Stock Lawn Oil field water Other

9. Casing: Material 1620 Height: Above or below _____
Threaded Welded Surface _____ in.
RMB PVC Weight _____ lbs./ft.
Dia. 4 in. to 11 ft. depth Wall Thickness: inches or _____
Dia. _____ in. to _____ ft. depth gage No. 1/4

5. Type and color of material	From	To
clay, fine sand, M gravel	0	9 1/2
M. Gravel, gravel	9	11
clay M. gravel	11	13
some clay, M. gravel, gravel	13	16
loose M. gravel, gravel	16	22
clay	22	23
M. gravel	23	24
clay	24	26
blue mud	26	31
little m. gravel, blue mud	31	40
blue shale	40	41
BROCK 40'		
3341 (TOPO)		

10. Screen manufacturer's name: Duke screen
Type 11 1/2 2 1/2 slot Dia. 4 1/2
Slot/gauze _____ Length _____
Set between _____ ft. and _____ ft.
Gravel pack? yes Size range of material 20

11. Static water level: _____ mo./day/yr.
9 ft. below land surface Date 9-1-75

12. Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield 619 g.p.m.

13. Water sample submitted: _____ mo./day/yr.
Yes No Date _____

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: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____

18. Elevation: _____
Topography: _____ Hill _____ Slope _____ Upland _____ Valley

19. Remarks: I handled the well digging myself. When I went to buy a pump + motor they told me that I should send this report in. If there is any other questions please contact me.
Dale Radul

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.
Business name _____ License No. _____
Address _____
Signed _____ Authorized representative _____ Date _____

T 63 S R 39 E 20 SW 1/4 SW 1/4