

USE TYPEWRITER OR BALL
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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>Lincoln</u> <u>Saline</u>	Fraction <u>NW 1/4 SW 1/4 NW 1/4</u>	Section number <u>8</u>	Township number T <u>13</u> S	Range number R <u>6W</u> E/W
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>6 mi. SW Beverly</u>			3. Owner of well: <u>Norman Troeger</u> R.R. or street: City, state, zip code: <u>Beverly, Kansas 67423</u>			
4. Locate with "X" in section below: <div style="text-align: center;"> </div>			Sketch map: <div style="text-align: center;"> </div>			
5. Type and color of material			From	To	6. Bore hole dia. <u>6</u> in. Completion date <u>10-15-76</u> Well depth <u>99</u> ft.	
<u>Clay + silt, gray + tan</u> <u>Missouri + Dakota</u>			<u>0</u>	<u>7</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	
<u>Shale, light gray + red</u>			<u>7</u>	<u>53</u>	8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<u>Sandstone, fine</u>			<u>53</u>	<u>57</u>	9. Casing: Material <input type="checkbox"/> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>4</u> in. to <u>99</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>Sched 40</u>	
<u>Shale, dark gray; contains thin</u> <u>hard zones of sideritic argillite</u>			<u>57</u>	<u>97</u>	10. Screen: Manufacturer's name <u>Shop</u> Type <u>slots</u> Dia. <u>4"</u> Slot/gauze <u>3/32"</u> Length <u>49'</u> Set between <u>50</u> ft. and <u>99</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/8</u>	
<u>Sandstone, fine</u>			<u>97</u>	<u>99</u>	11. Static water level: <u>5</u> ft. below land surface Date <u>10-15-76</u> mo./day/yr.	
					12. Pumping level below land surfaces: <u>1</u> ft. after <u>1</u> hrs. pumping <u>15</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>15</u> g.p.m.	
					13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>	
					14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.	
					16. Nearest source of possible contamination: <u>unknown</u> ft. <u> </u> Direction <u> </u> Type <u> </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 <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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 type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			19. Remarks: (Use a second sheet if needed)			
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>Hydramatic Drilling</u> <u>126</u> Business name License No. Address <u>Saline, Kas</u> Signed <u>Off. Tent</u> Date <u>10-29-76</u> Authorized representative						

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

Form WWC-5

1-3-6-8-10-11-12-13-14-15-16-17-18-19-20
 Sec 8
 1/4 1/4 1/4