

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

14 13 W 12 D A D
T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Russell	Township name Center	Fraction SE/NE/SE	Section number 12	Town number 14 South	Range number 13 West	
Distance and direction from nearest town or city: 1 1/2 South				3 Owner of well: City of Bunker Hill			
Street address of well location if in city:				Address: Bunker Hill, Kan 67626			
Locate with "X" in section below:		Sketch map:		4 Well depth: 270 ft. Date of completion 12-20-75 Well diameter 12 in.			
				5 <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			
				6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>			
				7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 24 in. Diam. _____ Weight _____ lbs./ft. _____ 6 in. to 270 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth			
2		Type and color of material		From		To	
		yellow clay		0		30	
		Blue shale		30		190	
		Layer Five sand		190		194	
		Blue shale		194		270	
				8 Screen: Manufacturer PVC Type PVC Dia. 6" Slot/gauze 1/4 Length 20' Set between 270 ft. and 250 ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____			
				9 Static water level: 140 ft. below land surface Date _____			
				10 Pumping level below land surfaces: 140 ft. after 24 hrs. pumping 40 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 100 g.p.m.			
				11 Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date 12-10-75			
				12 Well head completion: IN-SIDE PUMP? HOLES <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade			
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 60 ft. to 0 ft.			
				14 Nearest source of possible contamination: ft. 600 Direction SE Type Draw Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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			
16 Remarks: elevation Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley The well is drilled on a good location. Any possible contamination would have to come from south of well.				17 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. P+J Well Drilling 269 A Business name _____ License No. _____ Address _____ Signed Paul J. [Signature] Date 1-17-76 Authorized representative			

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

14 13 W 12 SE NE SE