

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>Ellis</u> | Fraction: <u>SW 1/4 SW 1/4 S 21/4</u> | Section number: <u>2</u>                           | Township number: <u>T 14</u>   | Range number: <u>S R 16</u> | <u>E(W)</u> |
| 2. Distance and direction from nearest town or city: <u>15 of Walker east side of road</u>  |                      |                                       | 3. Owner of well: <u>Norman Robben</u>             |  |                             |             |
| Street address of well location if in city:   |                      |                                       | R.R. or street:                                    |  |                             |             |
|   |                      |                                       | City, state, zip code: <u>Walker, Kansas 67674</u> |  |                             |             |
| 4. Locate with "X" in section below:  |                      | Sketch map:                           |  | 6. Bore hole dia. <u>9</u> in. Completion date <u>5/24/77</u>  |                             |             |
|   |                      |                                       |  | Well depth <u>35</u> ft.   |                             |             |
|   |                      |                                       |  | 7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary   |                             |             |
|   |                      |                                       |  | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other   |                             |             |
|   |                      |                                       |  | <input checked="" type="checkbox"/> Casing: Material <u>#100</u> Height: <u>Above</u> or below<br>Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>16</u> in.<br>RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>160</u> lbs./ft.<br>Dia. <u>5</u> in. to <u>35</u> ft. depth Wall Thickness: inches or<br>Dia. <u>  </u> in. to <u>  </u> ft. depth Gauge No. <u>258</u>    |                             |             |
| 5. Type and color of material   |                      | From To                               |  | <input checked="" type="checkbox"/> Screen: Manufacturer's name <u>Jet Stream</u><br>Type <u>PVC</u> Dia. <u>5"</u><br>Slot/gauge <u>231</u> Length <u>10</u><br>Set between <u>25</u> ft. and <u>35</u> ft.<br>Gravel pack? <u>yes</u> Size range of material <u>1/4 - 1/8</u>  |                             |             |
| <u>Topsoil</u>  |                      | <u>0 4</u>                            |  |  |                             |             |
| <u>Finesand</u>   |                      | <u>4 28</u>                           |  |  |                             |             |
| <u>Medium sand</u>  |                      | <u>28 33</u>                          |  |  |                             |             |
| <u>Blue shale</u>   |                      | <u>33 35</u>                          |  |  |                             |             |
|   |                      |                                       |  | 11. Static water level: <u>25</u> ft. below land surface Date <u>5/24/77</u> mo./day/yr.   |                             |             |
|   |                      |                                       |  | 12. Pumping level below land surfaces:<br><u>25</u> ft. after <u>1</u> hrs. pumping <u>5</u> g.p.m.<br><u>  </u> ft. after <u>  </u> hrs. pumping <u>  </u> g.p.m.<br>Estimated maximum yield <u>5</u> g.p.m.  |                             |             |
|   |                      |                                       |  | 13. Water sample submitted: <u>  </u> mo./day/yr.<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <u>  </u>  |                             |             |
|   |                      |                                       |  | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter <u>16</u> Inches above grade   |                             |             |
|   |                      |                                       |  | <input checked="" type="checkbox"/> Well grouted? <u>yes</u><br>With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete<br>Depth: From <u>2</u> ft. to <u>8</u> ft.   |                             |             |
|   |                      |                                       |  | 16. Nearest source of possible contamination: <u>none</u><br>ft. <u>  </u> Direction <u>  </u> Type <u>  </u><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                             |             |
|   |                      |                                       |  | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name <u>  </u><br>Model number <u>  </u> HP <u>  </u> Volts <u>  </u><br>Length of drop pipe <u>  </u> ft. capacity <u>  </u> g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |                             |             |
|   |                      |                                       |  | (Use a second sheet if needed)   |                             |             |
| 18. Elevation:  |                      | 19. Remarks:                          |  | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><u>KARST WATER WELL DRILLERS</u><br>Business name <u>NEWAY 40 Hwy</u> License No. <u>1598</u><br>Address <u>  </u> Signed <u>M. D. Robben</u> Date <u>5-27-77</u><br>Authorized representative  |                             |             |
| Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input checked="" type="checkbox"/> Upland<br><input type="checkbox"/> Valley |                      |                                       |  |  |                             |             |

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

Form WWC-5