

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>SE 1/4 NE 1/4 NE 1/4</u>	Section number: <u>16</u>	Township number: T <u>14</u> S	Range number: R <u>18</u> E <u>W</u>
2. Distance and direction from nearest town or city: <u>2 1/2 miles South of Harp, Kas.</u>		3. Owner of well: <u>Norbert Neuberger</u> R.R. or street: <u>1</u> City, state, zip code: <u>Harp, Kansas 67601</u>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date <u>8-4-78</u> Well depth <u>66</u> ft.	
		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		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	
				9. Casing: Material <u>Plt</u> Height: <u>(Above)</u> or below Threaded <input type="checkbox"/> Welded <u>gl</u> Surface <u>20'</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>36</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>14"</u>	
5. Type and color of material			From	To	10. Screen: Manufacturer's name <u>Jess Lammell</u>
<u>Top soil mix with brown clay</u>			<u>0</u>	<u>37</u>	Type <u>Plt</u> Dia. <u>5</u>
<u>Grey sand (coarse) with brown clay</u>			<u>37</u>	<u>62</u>	Slot/gauze Length <u>30</u>
<u>Dark Blue Shale</u>			<u>62</u>	<u>66</u>	Set between <u>36</u> ft. and <u>66</u> ft. ft. and <u> </u> ft.
					Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8" - 1/4"</u>
					11. Static water level: <u>26</u> ft. below land surface Date <u>8-4-78</u> mo./day/yr.
					12. Pumping level below land surfaces: <u>24</u> ft. after <u>1/2</u> hrs. pumping <u>10</u> g.p.m. 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> </u> Inches above grade
					15. Well grouted? <input type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>6</u> ft. to <u>18</u> ft.
					16. Nearest source of possible contamination: <u> </u> ft. <u>30</u> Direction <u>West</u> Type <u>leaver</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
(Use a second sheet if needed)					
18. Elevation: <u>Flat</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>We do not install pumps</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>Ruea Water Well Dring 276</u> Business name <u> </u> License No. <u> </u> Address <u>503 Monroe Ellis, Kas</u> Signed <u>John Ruea</u> Date <u>8-4-78</u> Authorized representative		

T 14 R 18 E 1/4 Sec 16 SE NE NE

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

Form WWC-5