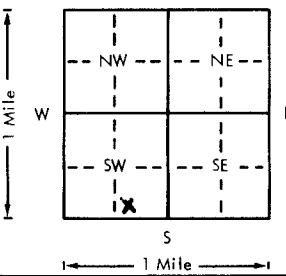


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Saline	Fraction SW 1/4 SE 1/4 SW 1/4	Section number 9	Township number T 14 S	Range number R 2 W E/W	
2. Distance and direction from nearest town or city: Street address of well location if in city: 1 Mi E Salina			3. Owner of well: John Roesner R.R. or street: Rt. 5 City, state, zip code: Salina Ks 67401				
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. 6 in. Completion date _____ Well depth 40 ft. 11-23-77			
5. Type and color of material		From	To	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			
Alluvium				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			
Clay, brown + gray		0	18	9. Casing: Material _____ Height: <u>Above</u> or below Threaded _____ Welded _____ Surface 12 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 4 in. to 40 ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. 5.40			
Gravel, medium		18	19	10. Screen: Manufacturer's name Shop Type slots Dia. 4" Slot/gauze 1/16" Length 10' Set between 30 ft. and 40 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/10"			
Clay, light gray		19	23	11. Static water level: _____ mo./day/yr. 19 ft. below land surface Date 11-23-77			
Gravel, coarse		23	34	12. Pumping level below land surfaces: 31 ft. after 1/2 hrs. pumping 12 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 12 g.p.m.			
Clay, light gray		34	37	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
Gravel, medium		37	40	14. Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade			
Wellington fm.				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 13 ft.			
Shale, gray + green		40	42	16. Nearest source of possible contamination: ft. 150 Direction N Type Creek Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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			
				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. Hydraulic Drilling 126 Business name _____ License No. _____ Address Salina 702 Signed O. J. Fent 12-10-77 Authorized representative _____ Date _____			
18. Elevation:		19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley							

14-209-SWSESW

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

Form WWC-5