

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>McPherson</u>	Fraction: <u>SE 1/4 NW 1/4 NE 1/4</u>	Section number: <u>19</u>	Township number: T <u>18</u> S R <u>1</u> NW	Range number: <u>1</u>
2. Distance and direction from nearest town or city: <u>7 mi. N AND 2 mi West of CANTON, KS.</u>	3. Owner of well: <u>VERIE WARNER (MAXWELL STATE PARK)</u>		R.R. or street: <u>KANSAS FISH + GAME RR #1 Box 26 CANTON, KANSAS 67428</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date: <u>8-23-78</u> Well depth <u>45</u> ft.	
				7. <input checked="" 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	
5. Type and color of material		From	To	8. Use: <input 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 checked="" type="checkbox"/> Other	
<u>Top Soil</u>		<u>0</u>	<u>2</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 <u>2</u> lbs./ft. Dia. <u>4</u> in. to <u>19</u> ft. depth Wall Thickness: inches or Dia. <u>4</u> in. to <u>45</u> ft. depth gage No. <u>.25 in</u>	
<u>FINE SAND</u>		<u>2</u>	<u>29</u>	10. Screen: Manufacturer's name <u>PEERLESS PLASTICS</u> Type <u>PVC</u> Dia. <u>4"</u> Slot/gauze <u>1/16</u> Length <u>20 ft</u> Set between <u>19</u> ft. and <u>39</u> ft. ft. and _____ ft.	
<u>Blue Shale</u>		<u>29</u>	<u>45</u>	Gravel pack? <input checked="" type="checkbox"/> YES Size range of material <u>1/4 in</u>	
				11. Static water level: _____ mo./day/yr. <u>12</u> ft. below land surface Date <u>8/23/78</u>	
				12. Pumping level below land surfaces: <u>25</u> ft. after <u>1 1/2</u> hrs. pumping <u>6</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>8</u> g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> YES With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: <u>SEPTIC</u> ft. <u>500</u> Direction <u>NORTH</u> Type <u>LINES</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 _____ 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	
		(Use a second sheet if needed)			
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	<u>To Supply WATER TO USERS OF PARK AS A NON-PERMITTED WATER SUPPLY</u>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>PETERSEN IRRIGATION 138</u> Business name _____ License No. _____ Address <u>Box 156 LINDSBORG, KS</u> Signed <u>Mike Petersen</u> Date <u>10-20-78</u> Authorized representative		

18-19 sec 19 sec 19 sec