

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: <b>Mopherson</b>	Fraction: <b>1/4 Sw 1/4 Sw 1/4</b>	Section number: <b>34</b>	Township number: <b>T 18 S</b>	Range number: <b>R 4 E</b>
2. Distance and direction from nearest town or city: <b>4 N 4 1/2 W</b>			3. Owner of well: <b>Richard Larson</b>		
Street address of well location if in city: <b>Mopherson</b>			R.R. or street: <b>904 Cottonwood</b>		
			City, state, zip code: <b>Mopherson, Ks. 67460</b>		
4. Locate with "X" in section below:		Sketch map:			
5. Type and color of material		From	To	6. Bore hole dia. <b>8</b> in. Completion date <b>5-10-79</b> Well depth <b>163</b> ft.	
<b>Top Soil</b>		<b>0</b>	<b>2</b>	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	
<b>yellow + Red Clay</b>		<b>2</b>	<b>55</b>	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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<b>dry Sand + Gravel</b>		<b>55</b>	<b>80</b>	9. Casing: Material <b>PVC</b> Height: <b>Above</b> below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>15</b> in. RMP <b>5</b> PVC <input checked="" type="checkbox"/> Weight <b>Sch 40</b> lbs./ft. Dia. <b>5</b> in. to <b>163</b> ft. depth Wall Thickness: inches or Dia. <b>5</b> in. to <b>163</b> ft. depth gage No. <b>250+</b>	
<b>Medium Sand</b>		<b>80</b>	<b>110</b>	10. Screen: Manufacturer's name <b>ASTM</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>40</b> Length <b>10'</b> <input checked="" type="checkbox"/> Set between <b>150</b> ft. and <b>160</b> ft. ft. and <b>160</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>4-20</b>	
<b>Gray Clay</b>		<b>110</b>	<b>116</b>	11. Static water level: _____ mo./day/yr. <b>90</b> ft. below land surface Date <b>5-10-79</b>	
<b>Medium to coarse Sand</b>		<b>116</b>	<b>135</b>	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
<b>Gray Clay</b>		<b>135</b>	<b>144</b>	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
<b>Medium to coarse Sand</b>		<b>144</b>	<b>163</b>	14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>3</b> ft. to <b>13</b> ft.	
				16. Nearest source of possible contamination: <b>Gas</b> ft. <b>60</b> Direction <b>NE</b> Type <b>Barrel</b> 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: <b>owner to run concrete slab around well 4'x4'x4'</b>			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. <b>Backhus Drg. 180</b> Business name _____ License No. _____ Address <b>Tampa Ks.</b> Signed <b>Paul Backhus</b> Date <b>5-31-79</b> Authorized representative	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 18 S R 4 E Sec 34 SE SW SW