

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>Rice</u>	Fraction: <u>CE 1/4 SW 1/4 SW 1/4</u>	Section number: <u>21</u>	Township number: <u>T 19 S</u>	Range number: <u>R 7 E</u>
2. Distance and direction from nearest town or city: <u>5-E 2-N 1/4-E of Lyons, KS.</u> Street address of well location if in city:			3. Owner of well: <u>Robert Huggins</u> R.R. or street: <u>Rt. 3</u> City, state, zip code: <u>Lyons, KS, 67554</u>		
4. Locate with "X" in section below: Sketch map: N W E S 1 Mile			6. Bore hole dia. <u>2 1/4</u> in. Completion date: <u>7-25-78</u> Well depth <u>100</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		
			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		
5. Type and color of material			9. Casing: Material <u>PVC</u> Height: Above or <u>below</u> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>6 1/2</u> in. to <input type="checkbox"/> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>280</u>		
			10. Screen: Manufacturer's name <u>Castro Teed</u> Type <u>PVC</u> Dia. <u>6 1/2</u> Slot/size <u>1/16</u> Length <u>20</u> Set between <u>80</u> ft. and <u>100</u> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>5/16-3/8</u>		
Top soil			From 0 To 3		
Brown clay			From 3 To 6		
Clay			From 6 To 18		
Yellow clay			From 18 To 28		
Shale			From 28 To 35		
Rusty rock			From 35 To 42		
Good sand rock			From 42 To 100		
Shale			From 100 To		
			11. Static water level: <input type="checkbox"/> mo./day/yr. <u>40</u> ft. below land surface Date <u>7-25-78</u>		
			12. Pumping level below land surfaces: <u>40</u> ft. after <u>1</u> hrs. pumping <u>40</u> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <u>100</u> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>7-25-78</u>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 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 <u>0</u> ft. to <u>12</u> ft.		
			16. Nearest source of possible contamination: ft. <u>400</u> Direction <u>E</u> Type <u>septic</u> Well disinfected upon completion? <u>HTH</u> Yes <input type="checkbox"/> No <input type="checkbox"/>		
			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: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Rosmarie Bemis</u> License No. <u>134</u> Business name _____ Address <u>1247 Bend, KS 67530</u> Signed <u>Sandy Kilgus</u> Date <u>8-4-78</u> Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 19 S R 7 E Sec 21 CE 1/4 SW 1/4