

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 <i>Rice</i>	Fraction <i>SE 1/4 SE 1/4 SW 1/4</i>	Section number <i>11</i>	Township number T <i>20</i> S <i>8</i> R <i>8</i> EW	Range number																								
2. Distance and direction from nearest town or city: <i>2 mi. S. 1-3/4 mi E. of Lyons, KS.</i> Street address of well location if in city:			3. Owner of well: <i>Northern Natural</i> R.R. or street: <i>Box 88</i> City, state, zip code: <i>Lyons, Mo 67554</i>																										
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 6. Bore hole dia. <i>9 1/2</i> in. Completion date _____ Well depth <i>70</i> ft. <i>1-4-78</i>																										
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;">5. Type and color of material</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><i>Top Soil</i></td> <td><i>0</i></td> <td><i>2</i></td> </tr> <tr> <td><i>Clay</i></td> <td><i>2</i></td> <td><i>13</i></td> </tr> <tr> <td><i>Sand + gravel</i></td> <td><i>13</i></td> <td><i>42</i></td> </tr> <tr> <td><i>Clay</i></td> <td><i>42</i></td> <td><i>48</i></td> </tr> <tr> <td><i>Sand + gravel</i></td> <td><i>48</i></td> <td><i>70</i></td> </tr> <tr> <td><i>Red Bed</i></td> <td><i>70</i></td> <td><i>72</i></td> </tr> <tr> <td colspan="3" style="text-align:center;">(Use a second sheet if needed)</td> </tr> </tbody> </table>			5. Type and color of material	From	To	<i>Top Soil</i>	<i>0</i>	<i>2</i>	<i>Clay</i>	<i>2</i>	<i>13</i>	<i>Sand + gravel</i>	<i>13</i>	<i>42</i>	<i>Clay</i>	<i>42</i>	<i>48</i>	<i>Sand + gravel</i>	<i>48</i>	<i>70</i>	<i>Red Bed</i>	<i>70</i>	<i>72</i>	(Use a second sheet if needed)			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		
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			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 checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other																										
			9. Casing: Material <i>PVC</i> Height: Above or below _____ Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>18</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <i>4 1/2</i> in. to <i>70</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <i>1237</i>																										
			10. Screen: Manufacturer's name _____ <i>Western - test</i> Type <i>per</i> Dia. <i>4 1/2</i> Slot/groze <i>1/16</i> Length <i>20</i> Set between <i>50</i> ft. and <i>70</i> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>3/4-1/2-3/8</i>																										
			11. Static water level: _____ mo./day/yr. <i>32</i> ft. below land surface Date <i>1-4-78</i>																										
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping <i>24</i> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.																										
			13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date _____																										
			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade																										
			15. Well grouted? _____ With: _____ Neat cement _____ Bentonite _____ Concrete Depth: From _____ ft. to _____ ft.																										
			16. Nearest source of possible contamination: ft. <i>50</i> Direction <i>W</i> Type <i>oil well</i> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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																										
18. Elevation: <i>1549</i>		19. Remarks: <i>Well will be pulled. plugged with gravel pack & well cuttings</i>		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. <i>Kasner and - Benis 1347</i> Business name _____ License No. _____ Address <i>Great Bend, Mo</i> Signed <i>Sandy Kilgus</i> Date <i>1-19-78</i> Authorized representative																									

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