

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>SE 1/4 SE 1/4 SW 1/4</u> Section number: <u>18</u> Township number: <u>T 20 S R 8</u> Range number: <u>E W</u>	
2. Distance and direction from nearest town or city: <u>4 miles Southwest of Lyons, KS</u> Street address of well location if in city:	
3. Owner of well: <u>Cecil Miller, etal *</u> R.R. or street: <u>Route 1</u> City, state, zip code: <u>Lyons, KS 67554</u>	
4. Locate with "X" in section below: Sketch map: N 1 Mile W E S 1 Mile Test Well No. 24 <u>2640' East &amp; 40' North of SW corner of Sec. 18</u>	
5. Type and color of material	
Top soil	From 0 To 3
Brown & gray clay	3 17
Sand & gravel & thin clay at 46' & 51'	17 68
Red shale	68 70
6. Bore hole dia. <u>5</u> in. Completion date <u>1-5-78</u> Well depth <u>68</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 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>Test Well</u>	
9. Casing: Material <u>PVC</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. RMP <u>2 1/2</u> PVC <input checked="" type="checkbox"/> Weight <u>.631</u> lbs./ft. Dia. <u>2 1/2</u> in. to <u>58</u> ft. depth Wall Thickness: inches or Dia. <u>1 1/2</u> in. to <u>58</u> ft. depth gage No. <u>110</u>	
10. Screen: Manufacturer's name <u>Clarke</u> Type <u>PVC</u> Dia. <u>2 1/2</u> " Slot/auze <u>1/8</u> " Length <u>10</u> ' Set between <u>58</u> ft. and <u>68</u> ft. ft. and <u>68</u> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>1/4</u> "	
11. Static water level: <u>16.7</u> mo./day/yr. <u>16.7</u> ft. below land surface Date <u>3-17-78</u>	
12. Pumping level below land surfaces: <u>Not Checked</u> ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m.	
13. Water sample submitted: <u>chl-1193</u> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>1-5-78</u>	
14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade	
15. Well grouted? <u>NO</u> ** With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft.	
16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ 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	
(Use a second sheet if needed)	
18. Elevation: (Ground) <u>1639.4</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: * Work performed on behalf of Cecil Miller etal to obtain ground water information RE: Miller vs. Cudahay lawsuit. ** Test wells were considered temporary when drilled. Due to pending litigation, a decision to plug wells or grout & establish permanent observation wells has not been made.
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>Clarke Well &amp; Eq., Inc. 185</u> Business name _____ License No. _____ Address <u>Great Bend, KS 67530</u> Signed <u>[Signature]</u> Date <u>8-25-78</u> Authorized representative	

20  
 R  
 W  
 18  
 Sec  
 1/4  
 1/4  
 1/4  
 S  
 E  
 S  
 E  
 S  
 W