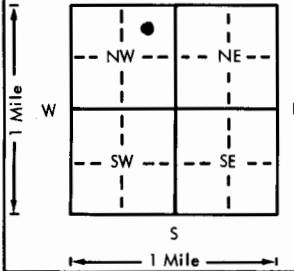


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

Plugged

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

| | | | | | | |
|---|--------------|---|---|--|-----------------------------|-------------------------|
| X Location of well: | | County <u>HARVEY</u> | Fraction <u>20 S 1/4 NE 1/4</u> | Section number <u>15</u> | Township number <u>23 S</u> | Range number <u>1 R</u> |
| 2. Distance and direction from nearest town or city: <u>3 MILES WEST</u> | | 3. Owner of well: <u>Wm Fry</u> | | | | |
| Street address of well location if in city: <u>2nd 1/2 NORTH OF NEWTON, KS.</u> | | R.R. or street: <u>Box 1810</u> | | | | |
| City, state, zip code: <u>Newton Kansas</u> | | | | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile | | Sketch map:  | | | | |
| 5. Type and color of material | | From | To | 6. Bore hole dia. <u>7</u> in. Completion date <u>May 28-77</u> | | |
| <u>top soil</u> | | <u>0</u> | <u>3</u> | Well depth <u>65</u> ft. | | |
| <u>brown clay</u> | | <u>3</u> | <u>7</u> | 7. <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug | | |
| <u>white clay</u> | | <u>7</u> | <u>15</u> | <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary | | |
| <u>Blue Shale</u> | | <u>15</u> | <u>55</u> | 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 type="checkbox"/> Other | | |
| | | | | 9. Casing: Material <input type="checkbox"/> Height: Above or below | | |
| | | | | Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. | | |
| | | | | RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. | | |
| | | | | Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth | | |
| | | | | Wall Thickness: inches or | | |
| | | | | Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth | | |
| | | | | gage No. <input type="checkbox"/> | | |
| | | | | 10. Screen: Manufacturer's name <input type="checkbox"/> | | |
| | | | | Type <input type="checkbox"/> Dia. <input type="checkbox"/> | | |
| | | | | Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/> | | |
| | | | | Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft. | | |
| | | | | <input type="checkbox"/> ft. and <input type="checkbox"/> ft. | | |
| | | | | Gravel pack? <input type="checkbox"/> Size range of material <input type="checkbox"/> | | |
| | | | | 11. Static water level: <input type="checkbox"/> mo./day/yr. | | |
| | | | | <input type="checkbox"/> ft. below land surface Date <input type="checkbox"/> | | |
| | | | | 12. Pumping level below land surfaces: | | |
| | | | | <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. | | |
| | | | | <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. | | |
| | | | | Estimated maximum yield <input type="checkbox"/> g.p.m. | | |
| | | | | 13. Water sample submitted: <input type="checkbox"/> mo./day/yr. | | |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/> | | |
| | | | | 14. Well head completion: | | |
| | | | | <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade | | |
| | | | | 15. Well grouted? <input type="checkbox"/> | | |
| | | | | With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete | | |
| | | | | Depth: From <input type="checkbox"/> ft. to <input type="checkbox"/> ft. | | |
| | | | | 16. Nearest source of possible contamination: | | |
| | | | | ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> | | |
| | | | | Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | 17. Pump: <input type="checkbox"/> Not installed | | |
| | | | | Manufacturer's name <input type="checkbox"/> | | |
| | | | | Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> | | |
| | | | | Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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: | | | This well was drilled under my jurisdiction and this report | | | |
| <input type="checkbox"/> Hill | | | is true to the best of my knowledge and belief. | | | |
| <input type="checkbox"/> Slope | | | <u>Terence Budder 221</u> | | | |
| <input type="checkbox"/> Upland | | | Business name <u>Newton Kansas</u> License No. <input type="checkbox"/> | | | |
| <input type="checkbox"/> Valley | | | Address <input type="checkbox"/> | | | |
| | | | Signed <u>Terence Budder</u> Date <u>6-12-77</u> | | | |
| | | | Authorized representative | | | |

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5