

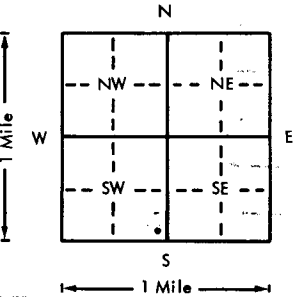

JETMORE SI

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

CDD

1. Location of well:		County Hodgeman	Fraction SE 1/4 SE 1/4 SW 1/4	Section number 29	Township number T 23	Range number S R 23	EW
2. Distance and direction from nearest town or city: 4 mi south; 1 mi East of Jetmore Street address of well location if in city:				3. Owner of well: Glen Bradford R.R. or street: Rte 1 City, state, zip code: Jetmore 67854			
4. Locate with "X" in section below: 				Sketch map: 			
5. Type and color of material			From	To	6. Bore hole dia. 9 5/8 in. Completion date 12-12-79 Well depth 78 ft.		
Clay, gyp			0	20	7. <input checked="" type="checkbox"/> Cable tool 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		
Gyp, rock			20	40	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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Gyp, sand, broken rock			40	60	9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded GIU Surface 2 1/2 in. RMP <input type="checkbox"/> PVC Weight 3.82 lbs./ft. Dia. 5 in. to 78 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 269		
Broken sand, clay, shale (75)			60	78	10. Screen: Manufacturer's name J & S Type J & S Dia. 5 in. Slot/gauze 1/32 Length 20 ft. Set between 58 ft. and 78 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material 1/8		
BROCK 75' R.R.					11. Static water level: <input type="checkbox"/> mo./day/yr. 50 ft. below land surface Date 12-12-79		
50					12. Pumping level below land surface: NOT MEASURED <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 2 g.p.m.		
25' sand sheet					13. Water sample submitted: <input type="checkbox"/> ma./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date		
in Og					14. Well head completion: <input type="checkbox"/> Pitless adapter 24 inches above grade		
					15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 15 ft. to 4 ft.		
					16. Nearest source of possible contamination: NA 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:	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.				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	2429 TOPD		High Plains Drilling & Supply, Inc Business name Address 5310 W Hwy 50-RT#1 License No. 1305 Jetmore 67846 Signed Arthur E. Rudman Date 12-15-79 Authorized representative				

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

Form WWC-5