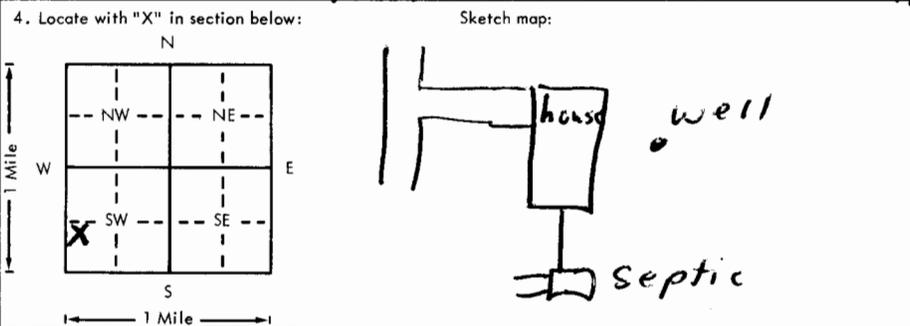


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Reno | Fraction NW 1/4 SW 1/4 SW 1/4 | Section number 11 | Township number T 23 S R 5 | Range number 5 | EW |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: 700 N. Obee Rd Hutchinson | | | | 3. Owner of well: Marvin Wambsgans SS R.R. or street: 700 N. Obee Rd City, state, zip code: Hutchinson Kan 67501 | | | |
| 4. Locate with "X" in section below:  | | | | 6. Bore hole dia. <u>9</u> in. Completion date <u>5-16-78</u> Well depth <u>38</u> ft. | | | |
| 5. Type and color of material | | | | From | To | 7. <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input checked="" type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary | |
| brown sandy soil | | | | 0 | 3 | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other | |
| brown sandy clay | | | | 3 | 7 | 9. Casing: Material <u>Plas</u> Height: <u>above</u> or below Threaded <input type="checkbox"/> Welded <u>6</u> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>6</u> in. to <u>38</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>175</u> | |
| fine sand | | | | 7 | 9 | 10. Screen: Manufacturer's name <u>J&L</u> Type <u>RMP</u> Dia. <u>6"</u> Slot/gauze <u>1/8 hole</u> Length <u>10'</u> Set between <u>28</u> ft. and <u>38</u> ft. _____ ft. and _____ ft. Gravel pack? <u>NO</u> Size range of material _____ | |
| fine gravel | | | | 9 | 13 | 11. Static water level: _____ mo./day/yr. <u>17</u> ft. below land surface Date <u>5-16-78</u> | |
| medium gravel | | | | 13 | 38 | 12. Pumping level below land surfaces: <u>17 1/2</u> ft. after <u>1</u> hrs. pumping <u>15</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>50</u> g.p.m. | |
| | | | | | | 13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____ | |
| | | | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade | |
| | | | | | | 15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft. | |
| | | | | | | 16. Nearest source of possible contamination: ft. <u>60</u> Direction <u>SW</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input 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: | | | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | | 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>Price Waterwell 193</u> Business name _____ License No. _____ Address <u>RR 3 Hutchinson</u> Signed <u>John Davenport</u> Date <u>6-20-78</u> Authorized representative | | | | | |

T 23 S R 5
 NW 1/4 SW 1/4
 Sec 11

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

Form WWC-5