

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

PRARIEVIEW

1. Location of well:	County <b>PHillips</b>	Fraction <b>SW 1/4 NE 1/4 NE 1/4</b>	Section number <b>23</b>	Township number <b>T 3</b>	Range number <b>S R 20 E/W</b>																																		
2. Distance and direction from nearest town or city: <b>6 miles Southeast of</b> Street address of well location if in city: <b>PRARIE VIEW KS.</b>			X Owner of well: <b>HAROLD JANSONIUS</b> R.R. or street: <b>RR 1</b> City, state, zip code: <b>PRARIE VIEW KS. 67664</b>																																				
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map:		6. Bore hole dia. <b>9</b> in. Completion date <b>8/20/76</b> Well depth <b>60</b> ft.																																			
5. Type and color of material <table border="1"><thead><tr><th></th><th>From</th><th>To</th></tr></thead><tbody><tr><td>CLAY, yellow</td><td>0</td><td>13</td></tr><tr><td>SAND FINE.</td><td>13</td><td>20</td></tr><tr><td>Rock, white</td><td>20</td><td>60</td></tr><tr><td colspan="3">Break 60' (241)</td></tr><tr><td colspan="3">then</td></tr><tr><td colspan="3">20</td></tr><tr><td colspan="3">40's at 1/4</td></tr><tr><td colspan="3">12 of</td></tr><tr><td colspan="3">TOPO 2161</td></tr><tr><td colspan="3">60</td></tr><tr><td colspan="3">2101</td></tr></tbody></table>			From	To	CLAY, yellow	0	13	SAND FINE.	13	20	Rock, white	20	60	Break 60' (241)			then			20			40's at 1/4			12 of			TOPO 2161			60			2101			7. 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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other																																							
9. Casing: Material <b>PLST.</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>275</b> lbs./ft. Dia. <b>5</b> in. to <b>40</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>316</b>																																							
10. Screen: Manufacturer's name <b>M. P. I.</b> <b>MODERN PIPES INC.</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/auze <b>022</b> Length <b>20'</b> Set between <b>40</b> ft. and <b>60</b> ft. Gravel pack? <b>YES</b> Size range of material <b>1/4</b>																																							
11. Static water level: <input type="checkbox"/> mo./day/yr. <b>20</b> ft. below land surface Date <b>8/20/76</b>																																							
12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>10</b> g.p.m.																																							
13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____																																							
14. Well head completion: ____ Pitless adapter <b>12</b> Inches above grade																																							
15. Well grouted? <b>YES</b> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>615</b> ft.																																							
16. Nearest source of possible contamination: ft. ____ Direction ____ Type <b>NONE.</b> 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																																							
18. Elevation:																																							
19. Remarks:  (Use a second sheet if needed)																																							
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. <b>FAWCETT &amp; SON</b> <b>167</b> Business name License No. Address <b>Norton KS</b> Signed <b>H. J. Fawcett</b> <b>8/20/76</b> Authorized representative																																							