

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>Cloud</u>		Fraction <u>(1/4) 1/4 NW 1/4</u>	Section number <u>13</u>	Township number <u>5</u>	Range number <u>3</u>
2. Distance and direction from nearest town or city: <u>2 miles north of Concordia - 2 1/4 east</u> Street address of well location if in city:			3. Owner of well: <u>Willis Keil Jr.</u> R.R. or street: <u>Rt. 2</u> City, state, zip code: <u>CONCORDIA, KANSAS 66901</u>		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map:		6. Bore hole dia. <u>30</u> in. Completion date <u>MAR 30, 1975</u> Well depth <u>66</u> ft.	
5. Type and color of material		From	To	7. Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input checked="" type="checkbox"/> Reverse rotary	
				8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other <input type="checkbox"/>	
				9. Casing: Material <u>TRANSITE</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>66</u> ft. depth Wall Thickness: inches <u>3/4</u> Dia. _____ in. to _____ ft. depth gage No. <u>0.75</u>	
				10. Screen: Manufacturer's name <u>Johnson Well Casing</u> Type <u>Transite</u> Dia. <u>16"</u> Slot/gauze <u>5/32</u> Length <u>26'</u> Set between <u>40'</u> ft. and <u>66</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4"</u>	
				11. Static water level: <u>36</u> ft. below land surface Date <u>6/30/75</u>	
				12. Pumping level below land surfaces: <u>64</u> ft. after <u>1/2</u> hrs. pumping <u>75</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>75</u> g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>JUNE 30, 1975</u>	
				14. Well head completion: <u>NO</u> Pitless adapter <u>12"</u> inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Depth: From <u>1</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: <u>feed lot</u> ft. <u>1200</u> Direction <u>NORTH</u> Type <u>feed lot</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: _____ Not installed Manufacturer's name <u>Western Land Packer</u> Model number <u>turbine</u> Volts <u>220</u> Length of drop pipe <u>65</u> ft. capacity <u>75</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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. <u>Carl Thorman & Son 247</u> Business name _____ License No. _____ Address <u>333 E 16th Concordia KS</u> Signed <u>Carl Thorman</u> Authorized representative <u>5-16-76</u>		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

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