

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 JEWELL	Fraction SW 1/4 NW 1/4 NW 1/4	Section number 8	Township number T 5 S R 9 E/W	Range number
2. Distance and direction from nearest town or city: 2 S 1/2 W			3. Owner of well: BOB ROSE			
Street address of well location if in city: IONIA KS.			R.R. or street: City, state, zip code: CAWKE, CITY KAN.			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date <u>11-5-74</u> Well depth <u>48</u> ft.		
				7. <input checked="" type="checkbox"/> 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		
5. Type and color of material		From	To	8. Use: <input checked="" 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		
TOP SOIL		0	2	9. Casing: Material <u>PLTS</u> Height: Above or below Threaded <input type="checkbox"/> Welded <u>PL</u> Surface <u>16</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>3811</u>		
Dark clay		2	20	10. Screen: Manufacturer's name _____ Type <u>RMP</u> Dia. <u>6"</u> Slot/gauze <u>1/16</u> Length <u>10'</u> Set between <u>38</u> ft. and <u>48</u> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 to 20</u>		
yellow clay		20	30	11. Static water level: _____ mo./day/yr. <u>20</u> ft. below land surface Date <u>11-5-74</u>		
Gravel white		30	42	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
Blue mud		42	48	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
(Use a second sheet if needed)				14. Well head completion: _____ Pitless adapter _____ Inches above grade		
				15. Well grouted? _____ With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>5</u> ft. to <u>15</u> ft.		
				16. Nearest source of possible contamination: ft. <u>40</u> Direction <u>W</u> Type <u>DRAW</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		
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>D & D Service</u> <u>108</u> Business name License No. Address <u>Downs Kan.</u> Signed <u>Wendell DeBor</u> Date <u>11-15-74</u> Authorized representative			

5-9-8
 Sec 8
 1/4 1/4 1/4 1/4
 SW NW