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	Fraction	Section number	Township number	Range number
	Sheridan	SW 1/4 SE 1/4 SW 1/4	34	T 9 S	R 29 E/W

2. Distance and direction from nearest town or city: GRINNELL Ks.
Street address of well location if in city: 4E - 6N

3. Owner of well: Geo Schwarz
R.R. or street:
City, state, zip code: GRINNELL Ks. 67738

4. Locate with "X" in section below: Sketch map:

N — NW, NE, W, E, SW, SE, S — 1 Mile

6. Bore hole dia. 9 in. Completion date 10-11-77
Well depth 137 ft.

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: X Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material _____ Height: Above or below
Threaded ____ Welded ____ Surface 12 up in.
RMP ____ PVC X Weight ____ lbs./ft.
Dia. 5 in. to 137 ft. depth Wall Thickness: inches or
Dia. ____ in. to ____ ft. depth gage No. 200

5. Type and color of material	From	To
top soil	0	23
sandy clay	23	50
m. gravel	50	71
sandy clay	71	113
F.S. + sandy clay	113	116
sandy clay + S.S.	116	123
m. gravel	123	127
sandy clay	127	131
m. gravel	131	134
Ochre	134	137
BROCK 134'		

(Use a second sheet if needed)

10. Screen: Manufacturer's name
Jess Lowell
Type PVC Dia. 5
Slot/gauze 1/8 Length 8'
Set between 129 ft. and 137 ft.
____ ft. and ____ ft.
Gravel pack? X Size range of material 1/8 - 1/4

11. Static water level: mo./day/yr.
70 ft. below land surface Date 10-11-77

12. Pumping level below land surfaces:
____ ft. after ____ hrs. pumping ____ g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield 30 plus g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date

14. Well head completion:
__ Pitless adapter 12" Inches above grade

15. Well grouted? X
With: X Neat cement ____ Bentonite ____ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. ____ Direction ____ Type None
Well disinfected upon completion? X Yes ____ No

17. Pump: X Not installed
Manufacturer's name
Model number ____ HP ____ Volts ____
Length of drop pipe ____ ft. capacity ____ g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:
Topography:
__ Hill
__ Slope
X Upland
__ Valley

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.
Business name STRUCKHOFF SONS License No. 298
Address GRINNELL Ks
Signed K Struckhoff Date 10-20-77
Authorized representative

T 9 R 29 (W) Sec 34 1/4 SW 1/4 SE 1/4 SW

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

Form WWC-5

MI-1023