

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>Ottowa</u> Fraction <u>NW 1/4 NW 1/4 SE 1/4</u> Section number <u>1</u> Township number <u>9 S R 4 E/W</u> Range number			
2. Distance and direction from nearest town or city: <u>2 1/2 mi 2 1/2 E 1/4 of Delphos</u> Street address of well location if in city:		3. Owner of well: <u>LeRoy Bremermer</u> R.R. or street: City, state, zip code: <u>Delphos, Ks.</u>	
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 	
5. Type and color of material <u>Top Soil</u>		From <u>0</u>	To <u>3</u>
<u>Brown Clay</u>		<u>3</u>	<u>6</u>
<u>Red & Yellow Clay</u>		<u>6</u>	<u>11</u>
<u>Yellow Clay</u>		<u>11</u>	<u>16</u>
<u>Black mud</u>		<u>16</u>	<u>35</u>
<u>Good clean sand Rock</u>		<u>35</u>	<u>67</u>
<u>Red and Blue Clay</u>		<u>67</u>	<u>83</u>
<u>HARD Rock</u>		<u>83</u>	<u>84</u>
<u>Clay</u>		<u>84</u>	<u>85</u>
<u>HARD Red & Black Clay</u>		<u>85</u>	<u>162</u>
<u>Pyrite</u>		<u>162</u>	<u>163</u>
<u>Shale</u>		<u>163</u>	<u>180</u>
<u>Sand Rock & Shale</u>		<u>180</u>	<u>184</u>
<u>Shale</u>		<u>184</u>	<u>187</u>
<u>Sand Rock & Shale</u>		<u>187</u>	<u>193</u>
<u>Poor Sand Rock</u>		<u>193</u>	<u>200</u>
<u>Extra Good Sand Rock</u> (Use a second sheet if needed)		<u>200</u>	<u>250</u>
18. Elevation: <u>21300</u> Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: <u>HARD Pyrite</u> <u>250 255</u>	
6. Bore hole dia. <u>2 1/2</u> in. Completion date <u>5-11-76</u> Well depth <u>245</u> ft.		7. <input 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	
8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		9. Casing: Material <u>steel</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>1 1/2</u> in. to <u>2 1/2</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>7</u>	
10. Screen: Manufacturer's name <u>Doerfs</u> Type <u>steel</u> Dia. <u>1 1/2</u> Slot gauge <u>3/16</u> Length <u>65</u> Set between <u>180</u> ft. and <u>245</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input type="checkbox"/> Size range of material <u>1/2 3/4 3/8</u>		11. Static water level: <input type="checkbox"/> mo./day/yr. <u>60</u> ft. below land surface Date <u>2-16-76</u>	
12. Pumping level below land surfaces: <u>30</u> ft. after <u>5</u> hrs. pumping <u>500</u> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <u>1000</u> g.p.m.		13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>3-5-76</u>	
14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
16. Nearest source of possible contamination: ft. <u>114</u> Direction <u>E</u> Type <u>Corral</u> Well disinfected upon completion? <input 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	
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>Rosencrantz - Bemis 134</u> Business name _____ License No. _____ Address <u>Great Bend, Ks.</u> Signed <u>Fredia Radson</u> Date <u>9/29/76</u> Authorized representative		1/4 1/4 1/4 1/4	

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

Form WWC-5