

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 POTAWATOMIE	Fraction SW 1/4 SW 1/4 SW 1/4	Section number 10	Township number T 10 S R 10 E/W	Range number 10
2. Distance and direction from nearest town or city: 1 SE			3. Owner of well: RAY FAIRCHILD			
Street address of well location if in city: OF WAMEGO			City, state, zip code: WAMEGO, KS 66547			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. 10 in. Completion date _____ Well depth 50 ft. 9-28-77	
					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	
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		
				9. Casing: Material PVC Height: Above or below Threaded _____ Welded _____ Surface 24 in. RMP _____ PVC 90 Weight 2.58 lbs./ft. Dia. 2 in. to 50 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 258		
TOP SOIL		0	7	10. Screen: Manufacturer's name _____ Type PVC Dia. 5 Gauge 020 Length 3 Set between 42 ft. and 50 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 030/1060		
SANDY CLAY		7	30	11. Static water level: _____ mo./day/yr. 30 ft. below land surface Date 9-28-77		
FINE SAND		30	37	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 30 g.p.m.		
GRAVEL		37	50	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				14. Well head completion: CAP <input type="checkbox"/> Pitless adapter 24 inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
				16. Nearest source of possible contamination: ft. 150 Direction S Type SEPTIC 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		
				(Use a second sheet if needed)		
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		OWNER TO INSTAL SLAB		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. STRAKER DRILLING CO INC 182 Business name License No. _____ Address RT 1 HOLTON, KS Signed Dale Cabren Date 4-29-77 Authorized representative		

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

Form WWC-5