

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

BBC

1. Location of well: County <b>Shawnee</b>		Fraction <b>SW 1/4 NW 1/4 NW 1/4</b>	Section number <b>31</b>	Township number <b>T 12S 10 S R 10E 13E</b>	Range number
2. Distance and direction from nearest town or city: <b>3 miles West of Rossville, Ks. on Maple Hill Rd.</b> Street address of well location if in city:			3. Owner of well: <b>Northwood Farms (Scott Kelsey)</b> R.R. or street: City, state, zip code: <b>Rossville, Kansas 66533</b>		
4. Locate with "X" in section below: N W E S 1 Mile Sketch map: <b>Rossville → 3 mi. Maple Hill Rd.</b>			6. Bore hole dia. <b>30</b> in. Completion date <b>6-17-77</b> Well depth <b>40</b> ft.		
5. Type and color of material			7. <input type="checkbox"/> Cable tool <input 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 checked="" 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		
From To			9. Casing: Material <b>Trans</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <b>16</b> in. to <b>27</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>75</b> "		
			10. Screen: Manufacturer's name _____ <b>Johnson Well Co.</b> Type <b>Transite</b> Dia. <b>16</b> " Slot/gauze <b>1/8 x 8</b> Length <b>13'</b> Set between <b>27</b> ft. and <b>40</b> ft. _____ ft. and _____ ft. Gravel pack? <b>yes</b> Size range of material <b>1/8-1/4"</b>		
Black soil			0	1	11. Static water level: _____ mo./day/yr. <b>18 1/2</b> ft. below land surface Date <b>6-17-77</b>
Brown silty sand			1	16	12. Pumping level below land surfaces: <b>25</b> ft. after <b>1</b> hrs. pumping <b>500</b> g.p.m. <b>32</b> ft. after <b>3</b> hrs. pumping <b>750</b> g.p.m. Estimated maximum yield <b>800</b> g.p.m.
Fine brown sand			16	20	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
Med. grey gravel			20	35	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade
Med. to large gray gravel & gray clay			35	36	15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.
Med. to large gray gravel & gray clay & boulders			36	38	16. Nearest source of possible contamination: ft. <b>300</b> Direction <b>north</b> Type <b>laterals</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Med. to large gray gravel			38	39	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
Hard gray clay			39	40	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. <b>Hoobler Drilling Co. 323</b> Business name License No. Address <b>St. Marys, Ks. 66536</b> Signed <b>Don Hoobler</b> Date <b>7-13-77</b> Authorized representative
Stopped.			40		
(Use a second sheet if needed)					
18. Elevation: _____		19. Remarks: <b>928 We do not install pumps.</b> <b>(From map)</b>			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

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

Form WWC-5

BR < 890  $\nabla = 912$