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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

ccc

1. Location of well:		County Shawnee	Fraction SW 1/4 SW 1/4 SW 1/4	Section number 24	Township number T 10 S R 14 E	Range number 14 E
2. Distance and direction from nearest town or city: 4 m North 1/2 west of Kiro			3. Owner of well: Phillip G. Brown R.R. or street: 8346 NW 62 St City, state, zip code: Topeka, KS 66618			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 6 1/2 in. Completion date 1-3-76 Well depth 80 ft.		
				7. <input checked="" 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 type="checkbox"/> Reverse rotary		
5. Type and color of material				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
				9. Casing: Material PITS Height: Above or below 24 in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 80 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 200		
				10. Screen: Manufacturer's name Sunflower 200 Type RMP Dia. 5" Slot/gauze 3/16 Length 50 in. Set between 30 ft. and 80 ft. _____ ft. and _____ ft. Gravel pack? No Size range of material _____		
				11. Static water level: _____ mo./day/yr. 37 ft. below land surface Date 1-3-76		
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 15 GPH		
				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter 24 inches above grade		
				15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 30 ft.		
				16. Nearest source of possible contamination: ft. 200 Direction WEST 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		
				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. Robison Drilling 316 Business name _____ License No. _____ Address Perry KS Signed Jack W. Robison Date 1-3-76 Authorized representative		
18. Elevation: 960		19. Remarks: Owner to install slab.				
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5

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