

32

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 <b>Wabunsee</b>	Fraction <b>NW 1/4 SW 1/4 SW 1/4</b>	Section number <b>28</b>	Township number <b>T 11 S</b>	Range number <b>R 12 E</b>
2. Distance and direction from nearest town or city: <b>1 mile west of 1 1/2 South on E Side Road</b>		3. Owner of well: <b>George Pollman</b>		City, state, zip code: <b>Parico Kans</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>10</b> in. Completion date <b>9-2-78</b> Well depth <b>77</b> 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		
				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 <b>Steel</b> Height: <b>18</b> in. Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>7 1/2</b> in. to <b>43</b> ft. depth Wall Thickness: inches <b>2 3/8</b> Dia. <b>3</b> in. to <b>77</b> ft. depth Wall No. <b>267</b>		
5. Type and color of material		From	To	10. Screen: Manufacturer's name <b>M.P.I.</b> Type <b>P.V.C.</b> Dia. <b>5"</b> Slot/groove <b>.040</b> Length <b>40'</b> Set between <b>37</b> ft. and <b>77</b> ft. Gravel pack? <b>no</b> Size range of material _____		
top soil		0	4	11. Static water level: _____ mo./day/yr. <b>20</b> ft. below land surface Date <b>9-2-78</b>		
Clay, yellow		4	20	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>20</b> g.p.m.		
Clay, white		20	33	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
Clay, Rubber like		33	43	14. Well head completion: <b>NA</b> Pitless adapter _____ Inches above grade		
Rocks, limestone, water 60'		43	65	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>15</b> ft. to <b>3</b> ft.		
Shale, Blue		65	77	16. Nearest source of possible contamination: ft. <b>1200</b> Direction <b>east</b> type <b>septic tank</b> 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. <b>Strader Drilling Co</b> <b>137</b> 1/4 SW 1/4 SW 1/4 Business name <b>Blue Rapids</b> License No. _____ Address <b>Harold Strader</b> Date <b>9-2-78</b> Signed _____ Authorized representative		
18. Elevation: <b>975</b> Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks:				

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

Form WWC-5

BR = 932

▽ = 955