

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 Dickinson		Fraction SW 1/4 SW 1/4 SE 1/4		Section number 4		Township number T 12 S R 3		Range number 3		(EW)	
2. Distance and direction from nearest town or city: 4 mi west 4 north Street address of well location if in city: Chapman				3. Owner of well: Elvin Jones R.R. or street: R.R. #5 City, state, zip code: Abilene, Kansas 67410							
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile				Sketch map: Pasture land				6. Bore hole dia. 8 in. Completion date 1/28/76 Well depth 101 ft.			
				7. <input checked="" 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 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 plastic Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 101 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 0.258			
5. Type and color of material				From		To		10. Screen: Manufacturer's name Western Plastics Type PVC Dia. 5" Slot/gauze 3/32 Length 41 Set between 60 ft. and 101 ft. ft. and <input type="checkbox"/> ft. Gravel pack? Yes Size range of material 1/16 to 3/8			
Yellow clay				0		12		11. Static water level: <input type="checkbox"/> mo./day/yr. 50 ft. below land surface Date 1/28/76			
Limestone, rock & clay				12		45		12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 16 g.p.m.			
Red clay				45		86		13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>			
Gray Rock				85		101		14. Well head completion: <input type="checkbox"/> Pitless adapter 18 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 10 ft.			
								16. Nearest source of possible contamination: none ft. located in a pasture Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
								17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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. Rader Drilling Co. 194 Business name License No. <input type="checkbox"/> Address Carlton, Kans. 67429 Signed Brant E Rader Date 4-16-74 Authorized representative			
18. Elevation:		19. Remarks:									
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley											

T 12 S R 3 E W 4 Sec 1/4 1/4 1/4

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

Form WWC-5