

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 NE 1/4 SE 1/4 NE 1/4	Section number 13	Township number T 12 S R # 3 EW	Range number 3 EW
2. Distance and direction from nearest town or city: Street address of well location if in city:		3 miles ^{north} east 1 west of Chapman, Kans.		3. Owner of well: R.R. or street: City, state, zip code:		
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>80</u> ft. <u>12/23/75</u>	
		PASTURE			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	
5. Type and color of material					9. Casing: Material <u>Plst</u> Height <u>Above</u> or below Threaded _____ Welded <u>gl</u> Surface <u>18</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>80</u> ft. depth Wall Thickness: _____ inches or Dia. _____ in. to _____ ft. depth Gage No. <u>0.214</u>	
					10. Screen: Manufacturer's name _____ Western Plastics Type <u>PVC</u> Dia. <u>5</u> Slot/gauze <u>3/32</u> Length <u>40</u> Set between <u>40</u> ft. and <u>80</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>1/16 to 3/8</u>	
					11. Static water level: _____ mo./day/yr. <u>45</u> ft. below land surface Date <u>12/23/75</u>	
					12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>16</u> g.p.m.	
					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 <u>18</u> inches above grade <input checked="" type="checkbox"/> Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
					15. Nearest source of possible contamination: ft. <u>1800</u> Direction <u>south</u> Type <u>sewer</u> 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. <u>Rader Drilling Co. 194</u> Business name _____ License No. _____ Address <u>Carlton, Kans. 67429</u> Signed <u>Brant E. Rader</u> Date <u>2-19-76</u> Authorized representative	
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

12-30-13 NE SE NE

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

Form WWC-5