

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 SE 1/4 SW 1/4SW 1/4	Section number 30	Township number T 12 S R 4	Range number EW
2. Distance and direction from nearest town or city: 1 mile north of Chapman			3. Owner of well: James Darrah 738 Oakhill Drive Chapman, Kansas 67431			
Street address of well location if in city:			R.R. or street: Chapman, Kansas 67431			
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>145</u> ft. <u>8-9-77</u>		
				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		From	To	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 <u>plst</u> Height: Above or below _____ Threaded <input type="checkbox"/> Welded <u>gl</u> Surface <u>18</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>145</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <u>0.258</u>		
Sand and clay		0	19	10. Screen: Manufacturer's name _____ Western Plastics		
Hard limestone		19	41	Type <u>RMP</u> Dia. <u>5 1/2</u> Slot/gauze <u>3/32</u> Length <u>90'</u> Set between <u>55</u> ft. and <u>145</u> ft. _____ ft. and _____ ft.		
Yellow clay "tough"		41	53	Gravel pack? <u>Yes</u> Size range of material <u>1/16 to 3/8</u>		
Red clay and shale		53	75	11. Static water level: _____ mo./day/yr. <u>55</u> ft. below land surface Date <u>8/9/77</u>		
Yellow clay		75	89	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>8</u> g.p.m.		
Extra hard limestone		89	101	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
Yellow clay and shale		101	115	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> inches above grade		
Limestone		115	121	<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>XD</u> ft. to <u>XD</u> ft.		
Yellow clay		121	126	16. Nearest source of possible contamination: ft. <u>150'</u> Direction <u>SW</u> Type <u>Septic</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Hard gray shale		126	138	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		
Blue shale and clay		138	145			
(Use a second sheet if needed)						
18. Elevation:	19. Remarks:		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.</u> 194 Business name License No. _____ Address <u>Carlton, Kansas 67429</u> Signed <u>Grant E. Rader</u> Date <u>8-15-77</u> Authorized representative			
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 12 S R 4 E W 30 SE 1/4 SW 1/4

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

Form WWC-5