

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: <u>Seary</u>	Fraction: <u>SE</u> <u>SE</u> <u>SE</u> 1/4 1/4 1/4	Section number: <u>4</u>	Township number: T <u>12</u> S	Range number: R <u>5</u> E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <u>Col. Kenneth Burgoon</u> R.R. or street: <u>25B Sharides ave</u> City, state, zip code: <u>Forty Riley, Mo. 66442</u>		
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <u>5</u> in. Completion date: <u>5-24-79</u> Well depth <u>102</u> 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		
5. Type and color of material			9. Casing: Material <u>PVC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>45</u> lbs./ft. Dia. <u>5</u> in. to <u>102</u> ft. depth <u>18</u> in. Thickness: inches or Dia. <u>5</u> in. to <u>102</u> ft. depth <u>18</u> in. gage No. <u>200</u>		
			10. Screen: Manufacturer's name <u>Plastics</u> <u>NSE approved</u> Type <u>Plastics</u> Dia. _____ Slot/gauze <u>0.60</u> Length <u>40</u> Set between <u>35</u> ft. and <u>56</u> ft. <u>76</u> ft. and <u>96</u> ft. Gravel pack? <u>yes</u> Size range of material <u>4 to 1/8</u>		
			11. Static water level: _____ mo./day/yr. <u>29</u> ft. below land surface Date <u>5-24-79</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>20</u> g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
			14. Well head completion: <u>capped</u> <input type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>20</u> ft.		
			16. Nearest source of possible contamination: ft. <u>500</u> Direction <u>South</u> Type <u>Creek</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>Blue Valley Drilling 2340</u> Business name _____ License No. _____ Address <u>Blue Rapids, Mo 66411</u> Signed <u>Gerald Strider</u> Date <u>6-4-79</u> Authorized representative		
18. Elevation:		19. Remarks:			
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)			

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

Form WWC-5