

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 Geary	Fraction NE 1/4 SW 1/4 SE 1/4	Section number 20	Township number T 12 S R 5	Range number EW
2. Distance and direction from nearest town or city: 7 miles east of		3. Owner of well: Marvin Mills			
Street address of well location if in city: Chapman, Kans.		R.R. or street: Chapman, Kans.			
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>6/3/77</u>		
5. Type and color of material			7. <input 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 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 _____ Welded <u>gl</u> Surface <u>18</u> in. RMP <u>3</u> 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>0.258</u>		
			10. Screen: Manufacturer's name <u>Western Plastics</u> Type <u>RMP</u> Dia. <u>5 1/2</u> Slot/gauze <u>3/32</u> Length <u>46</u> Set between <u>34</u> ft. and <u>80</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/16 to 3/8</u>		
			11. Static water level: _____ mo./day/yr. <u>37</u> ft. below land surface Date <u>6/3/77</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>5</u> g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> inches above grade		
			15. 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.		
			16. Nearest source of possible contamination: ft. _____ Direction _____ Type <u>none</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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		
(Use a second sheet if needed)					
18. Elevation:		19. Remarks:		20. Water well contractor's certification:	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		well was drilled in pasture		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 67129</u> Signed <u>Grant E. Rader</u> Date <u>6-22-77</u> Authorized representative	

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

Form WWC-5