

222

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

BAA

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:		County Shawnee	Fraction NE 1/4 NE 1/4 NW 1/4	Section number 11	Township number T 13 S R 13 E E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:		15 1/4 west of Dover		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. 6 1/4 in. Completion date 10-26-77 Well depth 102 ft.		
				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 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		
Top Soil		0	2	9. Casing: Material ALTS Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. 0.5 in. to 02 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 800		
Sandstone Brown		2	18	10. Screen: Manufacturer's name Swaflower Type RMP Dia. 5" Slot/gauze 3/16 Length 62' Set between 40 ft. and 102 ft. _____ ft. and _____ ft. Gravel pack? No Size range of material _____		
Lime		18	20	11. Static water level: _____ mo./day/yr. 49 ft. below land surface Date 10-26-78		
Brown Sandstone		20	39	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 2-3 g.p.m.		
Lime		39	41	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
Sandstone Brown		41	60	14. Well head completion: <input type="checkbox"/> Pitless adapter 24 inches above grade		
Shale sandy		60	68	15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 32 ft.		
Lime		68	76	16. Nearest source of possible contamination: ft. 100+ Direction South Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Shale sandy		76	90	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		
Shale		90	102	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. Robison Drilling 316 Business name _____ License No. _____ Address Perry K's Signed Jack Robison Date 10-26-78 Authorized representative		
18. Elevation: 1149 Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: owner to install slab				

13
130
11
1/4
1/4
1/4
NE 23

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

Form WWC-5