

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 <i>Dickinson</i>	Fraction <i>NW 1/4 NE 1/4 NE 1/4</i>	Section number <i>3</i>	Township number T <i>13</i> S R	Range number <i>2 EW</i>	
2. Distance and direction from nearest town or city: <i>1 1/2 mile East of Abilene</i>			3. Owner of well: <i>Edward Haugh</i>			R.R. or street: <i>R61 Abilene, Kan</i>	
4. Locate with "X" in section below:			Sketch map:			6. Bore hole dia. <i>7</i> in. Completion date <i>2-14-76</i>	
					Well depth <i>87</i> ft.		
5. Type and color of material			From	To	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		
<i>Top Soil - Blk</i>			<i>0</i>	<i>2</i>	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		
<i>Clay - Brun</i>			<i>2</i>	<i>10</i>	9. Casing: Material <i>P15</i> Height: Above or below Threaded <input type="checkbox"/> Welded <i>Ch</i> Surface <i>20</i> in. <input checked="" type="checkbox"/> RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft.		
<i>Red Rock</i>			<i>10</i>	<i>16</i>	Dia. <i>5</i> in. to <i>56</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <i>200</i>		
<i>Broken lime &amp; Shale Yellow</i>			<i>16</i>	<i>39</i>	10. Screen: Manufacturer's name <i>Sunflower</i>		
<i>Shale Gray</i>			<i>39</i>	<i>48</i>	Type <i>RMP</i> Dia. <i>5"</i> Slot/gauze <i>1/8</i> Length <i>30</i> Set between <i>56</i> ft. and <i>87</i> ft.		
<i>Hard Lime - Gray</i>			<i>48</i>	<i>50</i>	Gravel pack? <i>Yes</i> Size range of material <i>1/4 - 1/2</i> ft.		
<i>Shale Gray</i>			<i>50</i>	<i>56</i>	11. Static water level: _____ mo./day/yr. <i>52</i> ft. below land surface Date <i>2-14-76</i>		
<i>LIME Loose - Yellow 56 H2O</i>			<i>56</i>	<i>60</i>	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>25</i> g.p.m.		
<i>Red Rock -</i>			<i>60</i>	<i>73</i>	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
<i>LIME - Whit</i>			<i>73</i>	<i>74</i>	14. Well head completion: <input type="checkbox"/> Pitless adapter <i>20</i> Inches above grade		
<i>Shale - Gray</i>			<i>74</i>	<i>76</i>	15. Well grouted? <i>Yes</i> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.		
<i>LIME - Gray</i>			<i>76</i>	<i>80</i>	16. Nearest source of possible contamination: ft. <i>450'</i> Direction <i>SW</i> Type <i>Draw</i>		
<i>Shale - Yellow</i>			<i>80</i>	<i>87</i>	Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
18. Elevation:			19. Remarks: <i>Concrete slab 4'x4'x4" will be installed by customer</i>			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.	
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			<i>X Edward Haugh</i>			Business name <i>Zinn Water Well Drilling</i> License No. <i>218</i> Address <i>West Springs, Kan</i> Signed <i>Joseph A. Zinn</i> Date <i>2-14-76</i> Authorized representative	

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

Form WWC-5