

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 SW 1/4 SW 1/4SW 1/4 | Section number 18 | Township number T 13 S R 2 | Range number (E)W |
| 2. Distance and direction from nearest town or city: 2 miles west of Abilene | | | 3. Owner of well: Stan Veal R.R. or street: R.R. # 4 City, state, zip code: Abilene, Kansas 67410 | | | |
| 4. Locate with "X" in section below: | | Sketch map: | | 6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>37</u> ft. <u>6-28-77</u> | | |
| | | <p>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</p> <p>8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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</p> <p><input checked="" type="checkbox"/> Casing: Material <u>Dist</u> Weight: Above or below _____ Threading <u>Welded</u> Surface <u>18</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>37</u> ft. depth Wall Thickness: <u>0.238</u> inches or Dia. _____ in. to _____ ft. depth gage No. _____</p> | | 10. Screen: Manufacturer's name Western Plastics Type <u>RMP</u> Dia. <u>5"</u> Slot/gauze <u>3/32</u> Length <u>20'</u> Set between <u>17</u> ft. and <u>37</u> ft. _____ ft. and _____ ft. Gravel pack? <u>Yes</u> Size range of material <u>1/16 to 3/8</u> | | |
| | | | | 5. Type and color of material | | |
| | | | | 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>16</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: <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. <u>150</u> Direction <u>west</u> Type <u>septic</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. Rader Drilling Co. 194 Business name _____ License No. _____ Address Carlton, Kansas 67429 Signed Brant E Rader Date 8-15-77 Authorized representative | | |
| 18. Elevation: | | 19. Remarks: | | | | |
| <p>Topography:</p> <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | |

T 13
 R 2
 W (E)
 S 18
 Sec 1/4 1/4 1/4 1/4

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

Form WWC-5