

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 Section: NW 1/4 NW 1/4 NW 1/4 Section number: 19 Township number: T 13 S R 2 Range number: EW					
2. Distance and direction from nearest town or city: 1 mile west of Abilene Street address of well location if in city:		3. Owner of well: Don Sims 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. 8 in. Completion date: 8/24/78 Well depth 43 ft. 7. 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 type="checkbox"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other 9. Casing: Material plst Height: Above of 18 ft. below 8 ft. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> gl Surface 18 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 43 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gauge No. 0.258			
5. Type and color of material		From	To	10. Screen: Manufacturer's name: Western Plastics Type RMP Dia. 5 " Slot/gauze 3/32 Length 10 Set between 33 ft. and 43 ft. _____ ft. and _____ ft. Gravel pack? Yes Size range of material 1/16 to 3/8	
Sand		0	8	11. Static water level: _____ mo./day/yr. 20 ft. below land surface Date 8/24/78	
Clay		8	12	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 18 g.p.m.	
Sand		12	22	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
Gravel		22	32	14. Well head completion: _____ <input type="checkbox"/> Pitless adapter 18 Inches above grade	
Rock		32	41	15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.	
Blue clay		41	43	16. Nearest source of possible contamination: ft. 55 Direction north Type sewer Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(Use a second sheet if needed)				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	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:		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 Carl E Rader Date 10-2-78 Authorized representative		

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

Form WWC-5