

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 NW 1/4 NW 1/4 NW 1/4	Section number 36	Township number T 14 S R	Range number 2 (EW)		
2. Distance and direction from nearest town or city: Street address of well location if in city:		3. Owner of well: R.R. or street: City, state, zip code:		Stan Berven R.R. # 2 Abilene, Kansas 67410			
4. Locate with "X" in section below: N		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>20</u> ft. <u>5/30/79</u>			
		7. <input checked="" 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 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			
		9. Casing: Material <u>plst</u> Height: Above or set Threaded _____ Welded <u>gl</u> Surface <u>18</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>20</u> ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>0.258</u>		10. Screen: Manufacturer's name Western Plastics Type <u>RMP</u> Dia. <u>5"</u> Slot/gauze <u>3/32</u> Length <u>10'</u> Set between <u>10</u> ft. and <u>20</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			From	To	11. Static water level: <u>6</u> ft. below land surface Date <u>5/30/79</u> mo./day/yr.		
Top soil			0	6	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
Rock & gravel			6	10	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
Rock			10	12	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> Inches above grade		
Blue shale			12	20	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>200</u> Direction <u>north</u> Type <u>corral</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		
(Use a second sheet if needed)					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 <u>Grant E. Rader</u> Date <u>5-21</u> Authorized representative		
18. Elevation:		19. Remarks:				21. Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	

T
 14
 R
 20
 W
 36
 NW
 1/4
 1/4
 1/4

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

Form WWC-5