

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: Miami Fraction: SW 1/4 NE 1/4 SE 1/4 Section number: 22 Township number: T 15 Range number: S R 23 E	
2. Distance and direction from nearest town or city: 3/4 S. & 1/2 m W of SW CORNER of Spring Hill KS. Street address of well location if in city: 3. Owner of well: JOHN BIGGAR R.R. or street: R#1 City, state, zip code: Spring Hill, KS. 66083	
4. Locate with "X" in section below: N W E SW SE S 1 Mile Sketch map: 	
5. Type and color of material	
Surface	
Lime	
Shale	
Shale (Sandy)	
Total Depth	
From	To
2	19
19	52
52	100
6. Bore hole dia. 8 in. Completion date 7-14-80 Well depth 100 ft.	
7. <input checked="" type="checkbox"/> Cable tool ___ Rotary ___ Driven ___ Dug ___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary	
8. Use: <input checked="" type="checkbox"/> Domestic ___ Public supply ___ Industry ___ Irrigation ___ Air conditioning ___ Stock ___ Lawn ___ Oil field water ___ Other	
9. Casing: Material ___ Height: Above or below Threaded ___ Welded ___ Surface 13 in. RMP <input checked="" type="checkbox"/> PVC ___ Weight ___ lbs./ft. Dia. 5 in. to 100 ft. depth Wall Thickness: inches or Dia. ___ in. to ___ ft. depth Gage No. 3116	
10. Screen: Manufacturer's name ___ Type ___ Dia. ___ Slot/gauze ___ Length ___ Set between ___ ft. and ___ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 x 3/8	
11. Static water level: ___ mo./day/yr. 20 ft. below land surface Date 7-15-80	
12. Pumping level below land surfaces: ___ ft. after ___ hrs. pumping ___ g.p.m. ___ ft. after ___ hrs. pumping ___ g.p.m. Estimated maximum yield 1 1/2 g.p.m.	
13. Water sample submitted: ___ mo./day/yr. Yes <input checked="" type="checkbox"/> No ___ Date ___	
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter ___ Inches above grade	
15. Well grouted? ___ With: <input checked="" type="checkbox"/> Neat cement ___ Bentonite ___ Concrete Depth: From 4 ft. to 15 ft.	
16. Nearest source of possible contamination: ft. 150 Direction SOUTH Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ___ No ___	
17. Pump: ___ Not installed Manufacturer's name BURKS Model number SVA80 HP 1/2 Volts 220 Length of drop pipe 95 ft. capacity 10 g.p.m. Type: <input checked="" type="checkbox"/> Submersible ___ Turbine ___ Jet ___ Reciprocating ___ Centrifugal ___ Other	
(Use a second sheet if needed)	
18. Elevation: 6000' Topography: ___ Hill ___ Slope ___ Upland <input checked="" type="checkbox"/> Valley	19. Remarks: Customer is aware of state regulations and agrees to install a 4' square reinforced platform of concrete around top of well. X <u>John Biggar</u>
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. A.G. Glaze Drilling Co. 350 Business name Address: 15710 S. Woodland Rd. Omaha Signed: <u>A.G. Glaze</u> Date 7/20/80 Authorized representative	

15-23-80 Sec 22 BUSINESS

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

Form WWC-5