

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 <u>Dickinson</u> Fraction <u>SW 1/4 SW 1/4 NW 1/4</u> Section number <u>29</u> Township number <u>T 15 S R 3</u> Range number <u>3</u> (DW)	
2. Distance and direction from nearest town or city: <u>1 E 1 1/2 N</u> Street address of well location if in city: <u>Dillion</u>	
3. Owner of well: <u>Harry Hill</u> R.R. or street: <u>RR 3</u> City, state, zip code: <u>Hope Ks.</u>	
4. Locate with "X" in section below: Sketch map: BCC	
6. Bore hole dia. <u>9 1/2</u> in. Completion date <u>11-15-76</u> Well depth _____ 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 <u>PVC</u> Height: <u>Above</u> or below Threaded _____ Welded _____ Surface <u>9 1/2</u> in. RMP _____ <u>PVC</u> _____ Weight <u>2540</u> lbs./ft. Dia. <u>5</u> in. to <u>12</u> ft. depth Wall Thickness _____ inches or Dia. _____ in. to _____ ft. depth gage No. <u>250</u>	
5. Type and color of material	
	From To
<u>Top Soil</u>	<u>0</u> <u>2</u>
<u>yellow clay + shale</u>	<u>2</u> <u>46</u>
<u>Gray clay</u>	<u>46</u> <u>50</u>
<u>yellow shale</u>	<u>50</u> <u>68</u>
<u>Water</u>	<u>68</u> <u>70</u>
<u>Gray Rock</u>	<u>70</u> <u>72</u>
10. Screen: Manufacturer's name _____ <u>D.V.M.</u> Type <u>PVC</u> Dia. <u>3"</u> Slot/gauze <u>1/8</u> Length <u>10'</u> Set between <u>6 1/2</u> ft. and <u>7 1/2</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>4-20</u>	
11. Static water level: _____ ft. below land surface Date <u>11-15-76</u> <u>37</u> mo./day/yr.	
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.	
13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____	
14. Well head completion: <u>Well Head</u> _____ Pitless adapter <u>12</u> inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete _____ Depth: From <u>0</u> ft. to <u>12</u> ft.	
16. Nearest source of possible contamination: _____ ft. _____ Direction _____ Type <u>sewer line</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ 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: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other	
(Use a second sheet if needed)	
18. Elevation: Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope _____ Upland _____ 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. <u>Backhus Drg. 180</u> Business name _____ License No. _____ Address <u>Jama, Ks.</u> Signed <u>Paul Backhus</u> Date _____ Authorized representative	

15 - 30 - 22 - 1/4 SW NW

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

Form WWC-5