

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>Nw 1/4 W 1/4 W 1/4</u>	Section number: <u>7</u>	Township number: <u>T 15 S R 4</u>	Range number: <u>4</u>
2. Distance and direction from nearest town or city: <u>3 3/4 W</u>	3. Owner of well: <u>Craig Strida</u>		R.R. or street: <u>BRI</u>		
Street address of well location if in city: <u>Woodbine</u>		City, state, zip code: <u>Hope Mo. 67457</u>			
4. Locate with "X" in section below:		Sketch map:			
		6. Bore hole dia. <u>6 1/2</u> in. Completion date: <u>4-19-79</u> Well depth: <u>64</u> ft.			
		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			
		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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other			
		<input checked="" type="checkbox"/> Casing: <u>Metall</u> <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. RMP: <u>PVC</u> Weight: <u>300 wall</u> lbs./ft. Dia. <u>5</u> in. to <u>64</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>64</u> ft. depth gage <u>200 wall</u>			
5. Type and color of material		From	To		
<u>Top Soil</u>		<u>0</u>	<u>2</u>	10. Screens: Manufacturer's name: <u>Cer-mac</u>	
<u>Red Clay</u>		<u>2</u>	<u>8</u>	Type: <u>Styrene</u> Dia. <u>1 1/2</u>	
<u>yellow Clay</u>		<u>8</u>	<u>27</u>	Slot/gauze: <u>25</u> Length <u>20</u>	
<u>Some water</u>		<u>27</u>	<u>28</u>	Set between <u>54</u> ft. and <u>64</u> ft.	
<u>lime Stone</u>		<u>28</u>	<u>42</u>	Gravel pack? <input checked="" type="checkbox"/> Size range of material: <u>20</u>	
<u>Blue Shale</u>		<u>42</u>	<u>54</u>	11. Static water level: <u>22</u> ft. below land surface Date: <u>4-19-79</u>	
<u>Water</u>		<u>54</u>	<u>53</u>	12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.	
<u>Red Shale</u>		<u>53</u>	<u>64</u>	13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date: <u> </u>	
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> <u> </u> inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.	
				16. Nearest source of possible contamination: <u>HO9</u> <u>30</u> ft. Direction: <u>SW</u> Type: <u>Barn</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: <u> </u> Model number: <u> </u> HP: <u> </u> Volts: <u> </u> Length of drop pipe: <u> </u> ft. capacity: <u> </u> 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)					
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	<u>well went dry & has been plugged.</u>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Baachus Drg. 180</u> Business name: <u>Jampa, Ks.</u> License No. <u> </u> Address: <u> </u> Signed: <u>Paul Baachus</u> Date: <u>4-19-79</u> Authorized representative		

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

Form WWC-5