

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>Morris</u>	Fraction <u>SW 1/4 SW 1/4 SW 1/4</u>	Section number <u>3</u>	Township number <u>T 15</u>	Range number <u>S R 6 E/W</u>
2. Distance and direction from nearest town or city:	<u>2 S 1 W</u>		3. Owner of well:	<u>Dale Morrison</u>	
Street address of well location if in city:	<u>White City</u>		R.R. or street:	<u>RR</u>	
			City, state, zip code:	<u>White City</u>	
4. Locate with "X" in section below:	Sketch map:		6. Bore hole dia. <u>9</u> in.	Completion date <u>7-14-77</u>	
			Well depth <u>114</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		
			9. Casing: Material <u>PVC</u> Height: Above or below		
			Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>22</u> in.		
			RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>SCH 40</u> lbs./ft.		
			Dia. <u>5</u> in. to <u>114</u> ft. depth Wall Thickness: inches or		
			Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>250</u>		
5. Type and color of material	From	To	10. Screen: Manufacturer's name <u>ASTM</u>		
<u>Top Soil</u>	<u>0</u>	<u>2</u>	Type <u>PVC</u> Dia. <u>5-1/2</u>		
<u>Yellow Clay 13'</u>	<u>2</u>	<u>15</u>	Slot/gauze <u>10</u> Length <u>30</u>		
<u>Lime Stone 5'</u>	<u>15</u>	<u>20</u>	Set between <u>84</u> ft. and <u>114</u> ft.		
<u>Yellow Clay 25'</u>	<u>20</u>	<u>45</u>	Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4-3/8</u>		
<u>Some Water</u>	<u>45</u>	<u>45</u>	11. Static water level: <u>94</u> ft. below land surface Date _____		
<u>Lime Stone 15'</u>	<u>45</u>	<u>60</u>	12. Pumping level below land surfaces:		
<u>Yellow Shale 32'</u>	<u>60</u>	<u>92</u>	____ ft. after _____ hrs. pumping _____ g.p.m.		
<u>Water 1'</u>	<u>92</u>	<u>95</u>	____ ft. after _____ hrs. pumping _____ g.p.m.		
<u>Lime Stone + Shale 17'</u>	<u>93</u>	<u>110</u>	Estimated maximum yield _____ g.p.m.		
<u>Water 2'</u>	<u>110</u>	<u>112</u>	13. Water sample submitted: _____ mo./day/yr.		
<u>Gray Beck 2'</u>	<u>112</u>	<u>114</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
			14. Well head completion:		
			<input checked="" type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/>		
			With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete		
			Depth: From <u>3</u> ft. to <u>13</u> ft.		
			16. Nearest source of possible contamination: <u>Hog</u>		
			ft. <u>80</u> Direction <u>W</u> Type <u>lot</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)					
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography:			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
<input type="checkbox"/> Hill			<u>Backhaus Drgl 100</u>		
<input checked="" type="checkbox"/> Slope			Business name _____ License No. _____		
<input type="checkbox"/> Upland			Address <u>Joplin Mo.</u>		
<input type="checkbox"/> Valley			Signed <u>Paul Backhaus</u> Date <u>7-14-77</u>		
			Authorized representative		

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

Form WWC-5