

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

Well # 3-16

1. Location of well:		County <u>Morris</u>	Fraction <u>NE 1/4 SE 1/4 SE 1/4</u>	Section number <u>27</u>	Township number T <u>15</u> S	Range number R <u>8</u> <u>EW</u>
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:			
4. Locate with "X" in section below:			Sketch map:		6. Bore hole dia. <u>6 1/4</u> in. Completion date <u>12-18-75</u> Well depth <u>110</u> ft.	
			<p>300' X STEEP DDA</p>		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	
5. Type and color of material			From	To	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	
<u>Top - Blk</u>			<u>0</u>	<u>4</u>	9. Casing: Material <u>RMP</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <u>g1</u> Surface <u>16</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>16</u> lbs./ft. Dia. <u>5</u> in. to <u>87</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>87</u> ft. depth gage No. <u>200</u>	
<u>Shale & Clay - Brn to Yellow</u>			<u>4</u>	<u>14</u>	10. Screen: Manufacturer's name <u>Jess & Lowe</u> Type <u>RMP</u> Dia. <u>5</u> Slot gauze <u>YB</u> Length <u>23'</u> Set between <u>87</u> ft. and <u>110</u> ft. Gravel pack? <u>NO</u> Size range of material _____	
<u>Shale - Blue (Powder)</u>			<u>14</u>	<u>19</u>	11. Static water level: _____ mo./day/yr. <u>87</u> ft. below land surface Date <u>12-18-75</u>	
<u>Lime - Soft - wht</u>			<u>19</u>	<u>22</u>	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.	
<u>Broken Lime & Shale - wht</u>			<u>22</u>	<u>35</u>	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
<u>Lime - wht</u>			<u>35</u>	<u>36</u>	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
<u>Shale - Gray</u>			<u>36</u>	<u>38</u>	15. Well grouted? <u>Yes</u> 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.	
<u>Red Rock - Red</u>			<u>38</u>	<u>41</u>	16. Nearest source of possible contamination: ft. <u>300</u> Direction <u>West</u> Type <u>Lake</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Shale - Gray</u>			<u>41</u>	<u>44</u>	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	
<u>Red Rock - Red</u>			<u>44</u>	<u>47</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. <u>Zinn Water Well Drilling 218</u> Business name _____ License No. _____ Address <u>Lost Springs, Kan</u> Signed <u>Joseph A. Zinn</u> Date <u>12-18-75</u> Authorized representative	
<u>Shale - Gray</u>			<u>47</u>	<u>50</u>		
<u>Flint on Lime - Gray</u>			<u>50</u>	<u>55</u>		
<u>Lime - Brownish</u>			<u>55</u>	<u>60</u>		
<u>Shale - Gray</u>			<u>60</u>	<u>62</u>		
<u>Lime - Gray</u>			<u>62</u>	<u>65</u>		
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:			20. Water well contractor's certification:	
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		<u>Concret slab installed 3' below Ground Level</u>			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Zinn Water Well Drilling 218</u> Business name _____ License No. _____ Address <u>Lost Springs, Kan</u> Signed <u>Joseph A. Zinn</u> Date <u>12-18-75</u> Authorized representative	

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

Form WWC-5

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

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KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

Well # 3-16 cont.

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