


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 <b>Franklin</b>	Fraction <b>N.E. 1/4 N.W. 1/4 N.W. 1/4</b>	Section number <b>26</b>	Township number <b>T 16 S R 17 E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>2 3/4 Miles West &amp; 2 North</b> Street address of well location if in city: <b>Pomona</b>			3. Owner of well: <b>Ralph Hamilton</b> R.R. or street: <b>R.R.</b> City, state, zip code: <b>Pomona, Kansas</b>		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <b>5 1/4</b> in. Completion date <b>1-19-77</b> Well depth <b>190</b> ft. <b>9' to 20'</b>
<b>Soil</b>			<b>0</b>	<b>4</b>	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
<b>Shelly Rock</b>			<b>4</b>	<b>7</b>	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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
<b>Lime</b>			<b>7</b>	<b>15</b>	9. Casing: Material <b>P.V.C.</b> Weight: Above <b>18</b> in. Threading <b>Sch. 40</b> Welded <input type="checkbox"/> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>305</b> lbs./ft. Dia. <b>5</b> in. to <b>190</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>Sch. 40</b>
<b>Shale</b>			<b>15</b>	<b>22</b>	10. Screen: Manufacturer's name _____ <b>Crown Line</b> Type <b>P.V.C.</b> Dia. <b>5</b> Slot/gauze <b>3/16</b> Length <b>30</b> Set between <b>160</b> ft. and <b>170</b> ft. _____ ft. and _____ ft. Gravel pack? <b>No</b> Size range of material _____
<b>Lime</b>			<b>22</b>	<b>34</b>	11. Static water level: _____ mo./day/yr. <b>100</b> ft. below land surface Date <b>1-19-77</b>
<b>Shale</b>			<b>34</b>	<b>105</b>	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>30</b> g.p.m.
<b>Sandy Grey Shale</b>			<b>105</b>	<b>170</b>	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____
<b>Lime</b>			<b>170</b>	<b>172</b>	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>18</b> Inches above grade
<b>Sand</b>			<b>172</b>	<b>190</b>	15. Well grouted? <b>xx</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>20</b> ft.
					16. Nearest source of possible contamination: _____ ft. <b>150</b> Direction <b>West</b> Type <b>Lot</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					17. Pump: _____ Not installed Manufacturer's name <b>Red Jacket</b> Model number <b>50N1-9BC</b> HP <b>1/2</b> Volts <b>220</b> Length of drop pipe <b>180</b> ft. capacity <b>10</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
					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. <b>Edgar Swank Drilling 124A</b> Business name _____ License No. _____ Address <b>R.R. 4 Ottawa, Kansas</b> Signed <b>Edgar Swank</b> Date <b>4-10-77</b> Authorized representative
18. Elevation:	19. Remarks: <b>This is a A.S.C.S. well and was drilled for stock &amp; domestic water.</b>				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

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

Form WWC-5

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