

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.W. S.W. 1/4 N.W. 1/4</b>	Section number <b>16</b>	Township number <b>T 16</b>	Range number <b>S R 18 E/W</b>
2. Distance and direction from nearest town or city: <b>1 mi. N. 1/2 mi. W 1/2 N. Ottawa</b>			3. Owner of well: <b>Jerry Rowland</b> R.R. or street: <b>R.R. 4</b> City, state, zip code: <b>Ottawa, Kansas 66067</b>			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <b>6 1/2</b> in. Completion date <b>8-21-77</b> Well depth <b>95</b> ft. <b>9" to 18'</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	
					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	
					9. Casing: Material <b>PVC</b> Height: Above <b>ground</b> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>2'</b> in. RMP <input type="checkbox"/> PVC Weight <b>Sch 40</b> lbs./ft. Dia. <b>6</b> in. to <b>18</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>Sch 40</b>	
5. Type and color of material		From	To	10. Screen: Manufacturer's name _____ <b>NONE</b> Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. Gravel pack? <b>NONE</b> Size range of material _____		
Soil		0	05	11. Static water level: _____ mo./day/yr. <b>30</b> ft. below land surface Date <b>8-18-77</b>		
Yellow Sand stone		5	54	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>15</b> g.p.m.		
Grey Sand Stone		54	62	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
Lime Stone		62	67	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>24</b> inches above grade		
Coal		67	70	15. Well grouted? <input checked="" type="checkbox"/> With <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>15</b> ft.		
lime Stone		70	72	16. Nearest source of possible contamination: ft. <b>80</b> Direction <b>West</b> Type <b>Septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Grey Sandy Shale		72	80	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 _____ ft. capacity _____ 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		
Grey Sand		80	95			
		(Use a second sheet if needed)				
18. Elevation:		19. Remarks: <b>This Well to for a new home and all cement work will be finished at the same time.</b>			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>10-2-77</b> Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5

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