

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>NW 1/4 NE 1/4 NE 1/4</b>	Section number <b>36</b>	Township number <b>T 16 S R 18</b>	Range number <b>EW</b>
2. Distance and direction from nearest town or city: <b>1 mi. North 1/4 west</b> Street address of well location if in city: <b>Richter</b>				3. Owner of well: <b>Donald Hough</b> R.R. or street: <b>RR1</b> City, state, zip code: <b>Polona Kan.</b>		
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia <b>2 1/2"</b> Completion date <b>2-1-79</b> Well depth <b>105</b> ft. <b>9" to 30"</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		
5. Type and color of material				9. Casing: Material _____ Height: Above or <b>Below</b> Threaded _____ Welded _____ Surface <b>18</b> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <b>sch 40</b> lbs./ft. Dia. <b>6 1/2</b> in. to <b>30</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>sch 40</b>		
				10. Screen: Manufacturer's name _____ <b>none</b> Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> <b>no</b> Size range of material _____		
				11. Static water level: _____ mo./day/yr. <b>20</b> ft. below land surface Date <b>2-1-79</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.		
				13. Water sample submitted: _____ mo./day/yr. <input checked="" 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? _____ With <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <b>3</b> ft. to <b>30</b> ft.		
				16. Nearest source of possible contamination: ft. <b>west</b> Direction <b>100</b> Type <b>spetic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No		
				17. Pump: _____ Not installed Manufacturer's name <b>Red Jacket</b> Model number <b>50N19BC</b> HP <b>1/2</b> Volts <b>220</b> Length of drop pipe <b>100</b> ft. capacity <b>9</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ 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>Royce Swank Drilling 371</b> Business name _____ License No. _____ Address <b>RR1 Ottawa, Kan 66067</b> Signed <b>Royce Swank</b> Date <b>3-9-79</b> Authorized representative		
18. Elevation:		19. Remarks:				
Topography: <input checked="" type="checkbox"/> Hill _____ Slope _____ Upland _____ Valley						

T 16 S R 18  
Sec 36  
NW 1/4 NE 1/4

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

Form WWC-5