

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

County FRANKLIN		Fraction SW 1/4 SW 1/4 SW 1/4	Section number 11	Township number T 16	Range number S R 19 E E 1
2. Distance and direction from nearest town or city: 2N 1W		3. Owner of well: GARY WALBURN			
Street address of well location if in city: OTTAWA KAN.		City, state, zip code: OTTAWA KANS. 66067			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 4 1/2 in. Completion date 8-30-71	
<div style="text-align:center;">N NW NE SE SW S 1 Mile</div>		<div style="text-align:center;">UP SEPTIC house. </div>		Well depth 95 ft. 9' to 24'	
				7. Cable tool ___ Rotary ___ Driven ___ Dug ___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary	
				8. Use: <input checked="" type="checkbox"/> Domestic ___ Public supply ___ Industry ___ Irrigation ___ Air conditioning ___ Stock ___ Lawn ___ Oil field water ___ Other	
				9. Casing: Material ___ Height: Above or below Threaded ___ Welded ___ Surface 18 in. RMP ___ PVC <input checked="" type="checkbox"/> Weight Sch 40 lbs./ft. Dia. ___ in. to ___ ft. depth Wall Thickness: inches of Dia. ___ in. to ___ ft. depth gage No. Sch 40	
5. Type and color of material		From	To	10. Screen: Manufacturer's name _____	
SOIL		0	8	Type NONE	
GRAY SHALE,		8	22	Slot/gauze Length Set between ___ ft. and ___ ft.	
LIME		22	30	Gravel pack? ___ Size range of material _____	
SHALE BLACK		30	35	11. Static water level: ___ mo./day/yr.	
LIME.		35	55	12. Pumping level below land surfaces:	
SHALE		55	60	___ ft. after ___ hrs. pumping ___ g.p.m.	
LIME		60	72	___ ft. after ___ hrs. pumping ___ g.p.m.	
SHALE		72	85	Estimated maximum yield LESS THAN g.p.m.	
LIME		85	95	13. Water sample submitted: ___ mo./day/yr.	
				Yes <input checked="" type="checkbox"/> No Date X	
				14. Well head completion: PUMP HOUSE	
				___ Pitless adapter ___ Inches above grade	
				15. Well grouted? ___	
				With: ___ Neat cement ___ Bentonite ___ Concrete	
				Depth: From ___ ft. to ___ ft.	
				16. Nearest source of possible contamination:	
				ft. 80 Direction NW Type SEPTIC	
				Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ___ 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:	
				___ Submersible ___ Turbine	
				___ Jet ___ Reciprocating	
				___ Centrifugal ___ Other	
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography: ___ Hill ___ Slope <input checked="" type="checkbox"/> Upland ___ Valley	This well as the same as dry when I left it but the customer wanted the well left cased. The well		ED SWANK DRILLING INC. Business name License No. _____ Address 174 OTTAWA KAN. Signed Edgar Swank Date 12-10-71 Authorized representative		

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

Form WWC-5