

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>Dickinson</b>	Fraction <b>Ne 1/4 Ne 1/4 Ne 1/4</b>	Section number <b>12</b>	Township number <b>T 16 S</b>	Range number <b>R 4 E</b>				
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <b>Ernest Phelps</b> R.R. or street: <b>RR</b> City, state, zip code: <b>Delavan Ks 66847</b>							
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile W <table border="1" style="display: inline-table;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table> E S 1 Mile</div>			NW	NE	SW	SE	Sketch map:			6. Bore hole dia. <b>2-2</b> in. Completion date <b>12-1-76</b> Well depth <b>63</b> ft.
NW	NE									
SW	SE									
5. Type and color of material			From	To	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: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>Sch 40</b> lbs./ft. Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>258</b>					
					10. Screen: Manufacturer's name <b>ATM</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>1/8</b> Length <b>20</b> ft. Set between <b>43</b> ft. and <b>63</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>3/8</b>					
					11. Static water level: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> ft. below land surface Date					
					12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.					
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date					
					14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> inches above grade					
					15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>3</b> ft. to <b>13</b> ft.					
					16. Nearest source of possible contamination: <b>City Sewer Line</b> ft. <b>40</b> Direction <b>N</b> Type <b>Sewer Line</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No					
		17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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								
(Use a second sheet if needed)			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>Backhus Drilling 180</b> Business name <b>Tampa, Ks 67483</b> License No. Address <b>Backhus</b> Signed <b>Backhus</b> Date <b>12-1-76</b> Authorized representative							
18. Elevation:		19. Remarks:								
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley										

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

Form WWC-5