

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 <u>Dickinson</u>		Fraction <u>SE 1/4 SW 1/4 NW 1/4</u>		Section number <u>16</u>		Township number <u>T 16 S</u>		Range number <u>R 4 E/W</u>			
2. Distance and direction from nearest town or city: <u>3 mile west of Herington</u>				3. Owner of well: <u>Dennise JONES</u>							
Street address of well location if in city:				R.R. or street: <u>Herington, Kan</u>							
City, state, zip code: <u>Herington, Kan</u>											
4. Locate with "X" in section below:				Sketch map:				6. Bore hole dia. <u>6 1/4</u> in. Completion date <u>9-17-76</u>			
								Well depth <u>50</u> ft.			
								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 <u>PIES</u> Height: <u>Above</u> or below			
								Threaded <input type="checkbox"/> Welded <u>glw</u> Surface <u>18</u> in.			
								RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft.			
								Dia. <u>5</u> in. to <u>30</u> ft. depth Wall Thickness: inches or			
								Dia. _____ in. to _____ ft. depth gage No. <u>1200</u>			
5. Type and color of material				From		To		10. Screen: Manufacturer's name <u>Sunflower</u>			
<u>Topsoil</u>				<u>0</u>		<u>5</u>		Type <u>RMP</u> Dia. <u>5"</u>			
<u>Shale - Yel</u>				<u>5</u>		<u>7</u>		<u>1/16</u> gauze <u>20</u> Length <u>20</u>			
<u>LIME - Yel</u>				<u>7</u>		<u>11</u>		Set between <u>30</u> ft. and <u>50</u> ft.			
<u>Red Rock - Red</u>				<u>11</u>		<u>19</u>		Gravel pack? <u>NO</u> Size range of material _____			
<u>Shale - Yel</u>				<u>19</u>		<u>29</u>		11. Static water level: _____ mo./day/yr.			
<u>LIME (Broken) - Wht</u>				<u>29</u>		<u>30</u>		<u>30</u> ft. below land surface Date <u>9-17-76</u>			
<u>Shale - Lite</u>				<u>30</u>		<u>33</u>		12. Pumping level below land surfaces:			
<u>LIME - Yel</u>				<u>33</u>		<u>46</u>		_____ ft. after _____ hrs. pumping _____ g.p.m.			
<u>Shale - Gray</u>				<u>46</u>		<u>50</u>		_____ ft. after _____ hrs. pumping _____ g.p.m.			
								Estimated maximum yield <u>20</u> g.p.m.			
								13. Water sample submitted: _____ mo./day/yr.			
								Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____			
								14. Well head completion:			
								_____ Pitless adapter <u>18</u> Inches above grade			
								15. Well grouted? <u>Yes</u>			
								With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete			
								Depth: From <u>3</u> ft. to <u>13</u> ft.			
								16. Nearest source of possible contamination:			
								ft. <u>60</u> Direction <u>SE</u> Type <u>Septic</u>			
								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			
18. Elevation:		19. Remarks: <u>Concrete slab to be installed by customer x Vernon Jones</u>						20. Water well contractor's certification:			
Topography:								This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.			
_____ Hill								<u>Zinn Water Well Drilling 218</u>			
_____ Slope								Business name _____ License No. _____			
<input checked="" type="checkbox"/> Upland								Address <u>Lost Springs, Kan</u>			
_____ Valley								Signed <u>Joseph A. Zinn</u> Date <u>9-24-76</u>			
								Authorized representative			

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

Form WWC-5

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