

7-9-77

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 MORRIS	Fraction SW 1/4 SE 1/4 SE 1/4	Section number 9	Township number T 16-N S	Range number R 8 E
2. Distance and direction from nearest town or city: 1 MILE W			3. Owner of well: DR. J. E. BOWERS		
Street address of well location if in city: Council Grove			R.R. or street: 138 LAKESIDE DR		
			City, state, zip code: COUNCIL GROVE KS 66846		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 in. Completion date 6-3-77	
				Well depth 85 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 STEEL Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 10 lbs./ft. Dia. 5 in. to 5.0 ft. depth NO 200 Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth <input type="checkbox"/> gage No. <input type="checkbox"/>	
5. Type and color of material		From	To	10. Screen: Manufacturer's name JESS LOWELL	
CLEANED OUT WELL				Type 200 Dia. 5	
				Slot/gauze SAND Length <input type="checkbox"/>	
SHALE BLUE		65	80	Set between 50 ft. and 8.5 ft.	
LIME ROCK GRAY		80	85	Gravel pack? <input type="checkbox"/> Size range of material <input type="checkbox"/>	
				11. Static water level: 50 ft. below land surface Date 6-3-77	
				12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.	
				13. Water sample submitted: ____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <input type="checkbox"/>	
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 12 inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 15 ft.	
				16. Nearest source of possible contamination: ft. 100 Direction SW Type HOUSE Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: ____ Not installed Manufacturer's name PUMPCA Model number ____ HP 3 Volts 220 Length of drop pipe 80 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	
		(Use a second sheet if needed)			
18. Elevation:	19. Remarks:			20. Water well contractor's certification:	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	S			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. L HARPOSE SR 156 Business name License No. Address COUNCIL GROVE KS Signed L HARPOSE Date 6-6 Authorized representative	

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

Form WWC-5