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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 Lyon	Fraction SW 1/4 SE 1/4 NW 1/4	Section number 21	Township number T 18 S R 11 E/W	Range number 11
2. Distance and direction from nearest town or city: Street address of well location if in city:		4 1/2 mi. N. of Emporia		3. Owner of well: Donald Kitts R.R. or street: R.R. 5 City, state, zip code: Emporia, ks. 66801		
4. Locate with "X" in section below:		Sketch map: 				
5. Type and color of material		From		To		6. Bore hole dia. 10 in. Completion date 12/11/78 Well depth 25 ft.
Brown clay		0		20		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
Clay + gravel		20		22		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
Gravel		22		24 1/2		9. Casing: Material PL Height: Above or below Threaded <input type="checkbox"/> Welded GI Surface 18 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight 1.5 lbs./ft. Dia. 5 in. to 25 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 200
Rock (hard)		24 1/2		25		10. Screen: Manufacturer's name Sen Flower Sub set well casing Type RMP Dia. 5 in. Slot/gauze .06 Length 6 ft. Set between 19 ft. and 25 ft. Gravel pack? yes Size range of material 4 to 1/4"
						11. Static water level: 16 ft. below land surface Date 12/11/78 mo./day/yr.
						12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 40 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: 2' 6" below surface <input checked="" type="checkbox"/> Pitless adapter ____ Inches above grade
						15. Well grouted? yes With: ____ Neat cement ____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 3 ft. to 13 ft.
						16. Nearest source of possible contamination: sewer ft. 25' Direction NE Type lateral Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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: flat Topography: ____ Hill ____ Slope ____ Upland ____ Valley		19. Remarks: Owner will prepare/install 4' x 4' x 4" concrete slab at surface. Owner will install submersible pump.		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. Lepagnard W-W Contrs. 372 Business name Address 1312 Trail Ridge Rd. Signed Ginger Lepagnard Date 12/24/78 Authorized representative		

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

Form WWC-5