

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 Marion	Fraction SW 1/4 SE 1/4 SE 1/4	Section number 15	Township number T 18 S	Range number R 4E	E/W																								
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: Mrs Martin B. Hein R.R. or street: 433 S. Wichita City, state, zip code: Wichita, Kansas 67213																												
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. 9 in. Completion date May 22 1979 Well depth 86 ft.																										
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>5. Type and color of material</td> <td>From</td> <td>To</td> </tr> <tr> <td>Granite</td> <td>0</td> <td>4</td> </tr> <tr> <td>Lime</td> <td>4</td> <td>20</td> </tr> <tr> <td>Soap stone</td> <td>20</td> <td>30</td> </tr> <tr> <td>Red Rock</td> <td>30</td> <td>45</td> </tr> <tr> <td>Blue shale</td> <td>45</td> <td>55</td> </tr> <tr> <td>S Lime</td> <td>55</td> <td>75</td> </tr> <tr> <td>Blue shale</td> <td>75</td> <td>86</td> </tr> </table>			5. Type and color of material	From	To	Granite	0	4	Lime	4	20	Soap stone	20	30	Red Rock	30	45	Blue shale	45	55	S Lime	55	75	Blue shale	75	86	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		
					5. Type and color of material	From	To																								
Granite	0	4																													
Lime	4	20																													
Soap stone	20	30																													
Red Rock	30	45																													
Blue shale	45	55																													
S Lime	55	75																													
Blue shale	75	86																													
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 Plastic Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 6 in. to 29 ft. depth Well Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. See 40																												
10. Screen: Manufacturer's name Home made Type Plus Dia. 6 in Slot/gauze 1/8 Length 29 ft Set between 69 ft. and 87 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/2			11. Static water level: _____ mo./day/yr. 50 ft. below land surface Date May 22 1979																												
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 20 g.p.m.			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																												
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ 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 23 ft. to 25 ft.																												
16. Nearest source of possible contamination _____ ft. _____ Direction 1 mi Lincolnville Mo Type Lincolnville Mo 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: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other																												
18. Elevation:		19. Remarks:		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. Schump Water Well 278 Business name _____ License No. _____ Address Wichita, Kansas Signature William A. King Date _____ Authorized representative																											

T 18 S
 R 4E
 Sec 15
 SWSESE
 1/4 1/4 1/4

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

Form WWC-5