

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 Lyon	Fraction SW 1/4 SW 1/4 NW 1/4	Section number 24	Township number T 19 S R 11	Range number EA
2. Distance and direction from nearest town or city: South of Emporia		3. Owner of well: Barney Barnhardt		R.R. or street: RB1	
Street address of well location if in city:		City, state, zip code: Emporia Kan			
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: Prop line 25' 150' House Septic		
5. Type and color of material			From	To	6. Bore hole dia. 4 in. Completion date 5-8-76 Well depth 48 ft.
Topsoil - Blk			0	4	7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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 - Yellow			6	8	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
Clay - Red			8	13	9. Casing: Material Pits Height: Above or below Threaded <input type="checkbox"/> Welded glw Surface 18 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 22 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 1200
Clay SANDY - Like Red			13	23	10. Screen: Manufacturer's name Sunflower
Gravel - 1/4" x 3"			23	39	Type RMP Dia. 5" Slot gauge X6 Length 26' Set between 22 ft. and 48 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4-1/2
Shale - Blw			39	42	11. Static water level: <input type="checkbox"/> mo./day/yr. 22 ft. below land surface Date 5-8-76
Flint - Brw			42	48	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 25 g.p.m.
					13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date
					14. Well head completion: <input type="checkbox"/> Pitless adapter 18 Inches above grade
					15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 3 ft. to 13 ft.
					16. Nearest source of possible contamination: ft. 150' Direction SE Type Septic 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 <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. Zinn Water Well Drilling 218 Business name License No. Address Lost Springs, Kan Signed Joseph D. Zinn Date 5-9-76 Authorized representative
18. Elevation:	19. Remarks: Re-enforced concret slab 4'x4'x4" to be installed by Customer Barney Barnhart				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

T 19 S R 11 E 24 SW 1/4

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

Form WWC-5