

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 <i>Marion</i>	Fraction <i>SW 1/4 SW 1/4 SE 1/4</i>	Section number <i>34</i>	Township number T <i>19</i> S R <i>2</i>	Range number <i>EW</i>
2. Distance and direction from nearest town or city: <i>City of Hillsboro</i>			3. Owner of well: <i>Robert Annold</i> R.R. or street: <i>306 S. Wilson</i> City, state, zip code: <i>Hillsboro, Mo.</i>			
4. Locate with "X" in section below:			Sketch map:		6. Bore hole dia. <i>9</i> in. Completion date: <i>3-18-77</i> Well depth <i>24</i> 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	
5. Type and color of material			From	To	8. Use: <input 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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<i>Top Soil</i>			<i>0</i>	<i>2</i>	9. Casing: Material <i>PVC</i> Height <i>Above</i> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <i>12</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <i>3440</i> lbs./ft. Dia. <i>5</i> in. to <i>24</i> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <i>1250</i>	
<i>yellow clay</i>			<i>2</i>	<i>24</i>	10. Screen: Manufacturer's name <i>ASEM</i> Type <i>PVC</i> Dia. <i>5 1/2</i> Slot/gauze <i>5</i> Length <i>20</i> Set between <i>30</i> ft. and <i>60</i> ft. <i>70</i> ft. and <i>80</i> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>20</i>	
<i>lime stone</i>			<i>24</i>	<i>28</i>	11. Static water level: <i>30</i> ft. below land surface Date <i>3-18-77</i> mo./day/yr.	
<i>Gray + Blue Shale</i>			<i>28</i>	<i>55</i>	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.	
<i>Some Water</i>			<i>55</i>	<i>57</i>	13. Water sample submitted: ____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____	
<i>White Rock</i>			<i>57</i>	<i>74</i>	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter ____ inches above grade	
<i>Water</i>			<i>74</i>	<i>76</i>	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <i>3</i> ft. to <i>13</i> ft.	
<i>Blue Shale</i>			<i>76</i>	<i>84</i>	16. Nearest source of possible contamination: ft. <i>30</i> Direction <i>E</i> Type <i>everhine</i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ HP ____ Volts ____ Model number ____ 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	
					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. <i>Bachhus Drg 100</i> Business name License No. ____ Address <i>Tampa, Mo.</i> Signed <i>Paul Bachhus</i> Date <i>3-21-77</i> Authorized representative	
18. Elevation:			19. Remarks:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

19 - 20 - 34 SW SW SE 1/4 1/4 1/4

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

Form WWC-5