

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 Coffey		Fraction NE 1/4 NW 1/4 SE 1/4		Section number 22		Township number T 21 S		Range number R 15 EW			
2. Distance and direction from nearest town or city: lots 1+2 Wilson Addition Burlington, KS				3. Owner of well: J. E. Lafferty R.R. or street: Rt. 2 City, state, zip code: Burlington, KS 66839							
4. Locate with "X" in section below: N W E S 1 Mile				Sketch map: N ↑ Brewer House well		6. Bore hole dia. 8 in. Completion date 3-26-77 Well depth 30 ft.					
5. Type and color of material				From		To		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			
				Top Soil		Black		0 3		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	
				Clay-Sandy		Tan		3 20		9. Casing: Material PVC Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 36 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 30 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 258	
				Sand + Gravel		Tan		20 26		10. Screen: Manufacturer's name Step Perforated Type PVC Dia. 5 1/2 Slot/gauze 3/32 Length 6' Set between 20 ft. and 26 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/8	
				Shale		Grey		26 30		11. Static water level: 15 ft. below land surface Date 3-26-77 mo./day/yr. 3-26-77	
								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: owner to furnish <input type="checkbox"/> Pitless adapter 36 inches above grade			
								15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 10 ft. to 0 ft.			
								16. Nearest source of possible contamination: Synthetic Sewer ft. 30 Direction North Type Synthetic Sewer 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			
(Use a second sheet if needed)											
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. Bledsae Drilling Co. 152 Business name _____ License No. _____ Address Strong City, KS Signed Rayen P. Bledsae Date 3-27-77 Authorized representative							
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley											

T 21 S R 15 EW Sec 22 NE 1/4 NW 1/4 SE

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

Form WWC-5