

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 <b>Harvey</b>	Fraction <b>NW<sup>1</sup>/<sub>4</sub> NW<sup>1</sup>/<sub>4</sub> SW<sup>1</sup>/<sub>4</sub></b>	Section number <b>2</b>	Township number <b>T 22 S R 2 E</b>	Range number <b>2</b>																		
2. Distance and direction from nearest town or city: Street address of well location if in city:		3. Owner of well: R.R. or street: City, state, zip code:		<b>Fred B Arms</b> <b>406 Vine</b> <b>Peabody Kansas 66866</b>																			
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <b>5</b> in. Completion date <b>Sept 25 1979</b> Well depth <b>58</b> 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																				
			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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other																				
5. Type and color of material			9. Casing: Material <b>PVC</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>20</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>58</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>Sched 40</b>																				
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><b>Mumbo</b></td> <td><b>0</b></td> <td><b>20</b></td> </tr> <tr> <td><b>Shale</b></td> <td><b>20</b></td> <td><b>30</b></td> </tr> <tr> <td><b>Oil Back</b></td> <td><b>30</b></td> <td><b>38</b></td> </tr> <tr> <td><b>Shale</b></td> <td><b>38</b></td> <td><b>48</b></td> </tr> <tr> <td><b>Grime</b></td> <td><b>48</b></td> <td><b>58</b></td> </tr> </tbody> </table>				From	To	<b>Mumbo</b>	<b>0</b>	<b>20</b>	<b>Shale</b>	<b>20</b>	<b>30</b>	<b>Oil Back</b>	<b>30</b>	<b>38</b>	<b>Shale</b>	<b>38</b>	<b>48</b>	<b>Grime</b>	<b>48</b>	<b>58</b>	10. Screen: Manufacturer's name <b>Cerchar</b> Type <b>plastic (PVC)</b> Dia. <b>5 in</b> Slot/gauze <b>1/2 in</b> Length <b>20 ft</b> Set between <b>38</b> ft. and <b>58</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/2</b>		
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			11. Static water level: _____ mo./day/yr. <b>20</b> ft. below land surface Date <b>Sept 25 1979</b>																				
			12. Pumping level below land surfaces: <b>not pumped</b> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.																				
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____																				
			14. Well head completion: <input type="checkbox"/> Pitless adapter <b>18</b> 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 <b>0</b> ft. to <b>10</b> ft.																				
			16. Nearest source of possible contamination: <b>over a mile</b> ft. _____ Direction <b>?</b> Type <b>?</b> 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:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks:  <b>Pasture Well</b>		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. <b>Schimpf Water Well</b> Business name _____ License No. _____ Address <b>Marion</b> _____ <b>William</b> _____ Authorized representative Date <b>Sept 25 1979</b>																			

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

Form WWC-5