

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<br><b>HARVEY</b>        | Fraction<br><b>NW 1/4 SW 1/4 NW 1/4</b>  | Section number<br><b>B</b>   | Township number<br>T <b>23</b> S R   | Range number<br>R <b>1</b> <b>EW</b>   |
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city:  |  |                                | 3. Owner of well: <b>GARY GRAY</b><br>R.R. or street: <b>641 WESTCHESTER</b><br>City, state, zip code: <b>NEWTON, KS</b> |  |  |  |
| 4. Locate with "X" in section below:   |  | Sketch map:                    |  |  | 6. Bore hole dia. <u>14</u> in. Completion date _____<br><input checked="" type="checkbox"/> Well depth <u>46</u> ft. <u>3-7-78</u>  |  |
|  |  |                                |  |  | 7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><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<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other   |  |  |
|  |  |                                |  | 9. Casing: Material <u>PLASTIC</u> Height: <u>Above</u> or below<br>Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>18</u> in.<br>RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>3.58</u> lbs./ft.<br>Dia. <u>6</u> in. to <u>40</u> ft. depth Wall Thickness: inches or<br>Dia. _____ in. to _____ ft. depth gage No. <u>1280</u>                                      |  |  |
|  |  |                                |  | 10. Screen: Manufacturer's name<br><u>Pumpco - own slot</u><br>Type _____ Dia. <u>6"</u><br>Slot/gauze <u>.046</u> Length <u>15'</u><br>Set between <u>33</u> ft. and <u>48</u> ft.<br>_____ ft. and _____ ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-1/4</u>   |  |  |
|  |  |                                |  | 11. Static water level: _____ mo./day/yr.<br><u>21</u> ft. below land surface Date <u>3/7/79</u>   |  |  |
|  |  |                                |  | 12. Pumping level below land surfaces:<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br><u>33'</u> ft. after <u>3</u> hrs. pumping <u>18</u> g.p.m.<br>Estimated maximum yield <u>20</u> g.p.m.   |  |  |
|  |  |                                |  | 13. Water sample submitted: _____ mo./day/yr.<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____  |  |  |
|  |  |                                |  | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter <u>18</u> Inches above grade   |  |  |
|  |  |                                |  | 15. Well grouted? <input checked="" type="checkbox"/><br>With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <u>10</u> ft. to <u>0</u> ft.   |  |  |
|  |  |                                |  | 16. Nearest source of possible contamination: <u>house</u><br>ft. <u>20</u> Direction <u>WEST</u> Type <u>Surface</u><br>Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |  |
|  |  |                                |  | 17. Pump: _____ Not installed<br>Manufacturer's name <u>Dempster</u><br>Model number <u>HP23-5052-1/2</u> Volts <u>230</u><br>Length of drop pipe <u>41</u> ft. capacity <u>18</u> g.p.m.<br>Type:<br><input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |  |  |
|  |  | (Use a second sheet if needed) |  |  |  |  |
| 18. Elevation:   |  | 19. Remarks:                   |  |  |  | 20. Water well contractor's certification:   |
| Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  | * Intermittent Sand Seams      |  |  |  | This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><u>PAULIS INC. #175</u><br>Business name _____ License No. _____<br>Address <u>Box 26 Hesston</u><br>Signed <u>Paul Paulis</u> Date <u>3/22/79</u><br>Authorized Representative |

T 23 S 1 EW Sec 8 NW 1/4 1/4

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

Form WWC-5