

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>Greenwood</b>	Township name <b>Janesville</b>	Fraction <b>NW 1/4 NE 1/4</b>	Section number <b>10</b>	Town number <b>24S</b>	Range number <b>11E</b>		
Distance and direction from nearest town or city: <b>3/4 mile SW</b>			3 Owner of well: <b>City of Hamilton, Kansas</b>					
Street address of well location if in city: <b>Hamilton, Kansas</b>			Address: <b>Hamilton, Kansas 66853</b>					
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:			4 Well depth: <b>45'</b> ft. Date of completion: <b>2/25/76</b> Well diameter <b>8</b> in.		
2 Type and color of material			From	To	5 <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			
			Black Dirt		0	12	6 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"/> Commercial <input checked="" type="checkbox"/> Test well <input type="checkbox"/>	
			Sandy Shale, water at 15'		12	20	7 Casing: Material <b>none</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. Diam. <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. <input type="checkbox"/> in. to ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No in. to ft. depth	
			Blue Shale		20	24	8 Screen: Manufacturer <b>none</b> Type <input type="checkbox"/> Dia. <input type="checkbox"/> Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/> Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft. <input type="checkbox"/> Fittings: Gravel pack <input type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <input type="checkbox"/>	
			Gray Shale w/ sand, water @ 25'		24	28	9 Static water level: <b>11' 2"</b> ft. below land surface Date <b>2/25/76</b>	
			Blue Shale		28	31	10 Pumping level below land surfaces: <b>none</b> ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield <b>22.6</b> g.p.m.	
			Blue Shale w/ small amount of gravel, Water @ 31'		31	33	11 Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <b>2/27/76</b>	
			Sandy Lime & Gray Shale		33	34	12 Well head completion: <b>none</b> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	
			Gray Lime		34	38	13 Well grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <input type="checkbox"/> ft. to <input type="checkbox"/> ft.	
			Sandy Blue Shale, water @ 38.5		38	39	14 Nearest source of possible contamination: ft. <input type="checkbox"/> mile Direction <b>NW</b> Type <b>Oil</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gray Lime		39	41	15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> 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"/> Centrifugal <input type="checkbox"/> Reciprocating <input type="checkbox"/> Other				
Blue Shale		41	43	16 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>2/25/76</b> <b>Under Well Drilling 275</b> Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address <b>Box 47, Earl, Kansas 66731</b> Signed <b>Robert E. Walpe</b> Date <b>2-27-76</b> Authorized representative				
Sandy Blue Shale		43	45					
TD 45								
(use a second sheet if needed)								
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley								

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5