

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 WOODSON		Fraction NE/4 NE/4 NE/4		Section number 14		Township number T 25 S R 14		Range number 14	
2. Distance and direction from nearest town or city: Street address of well location if in city: LOT 142 BLK 16				3. Owner of well: BLAINE BEWELL R.R. or street: S. PRATT City, state, zip code: VATES CENTER KAN					
4. Locate with "X" in section below:		Sketch map:				6. Bore hole dia. 7 in. Completion date 4/19/81 Well depth 70 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			
DARK SOIL		0		3		9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 1 1/2 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 6 in. to 70 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gauge No. 180			
BW SAND ROCK		3		18		10. Screen: Manufacturer's name JESS LOWELL Type PVC Dia. 6 Slot/gauze 3/16 Length 20 Set between 40 ft. and 60 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input type="checkbox"/> Size range of material <input type="checkbox"/>			
HARD WHITE SAND ROCK		18		22		11. Static water level: <input type="checkbox"/> mo./day/yr. 16 ft. below land surface Date 4/15/81			
GREY SANDY SHALE		22		38		12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 8 g.p.m.			
WHITE SAND ← SOIL		38		56		13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>			
GREY SHALE		56		70		14. Well head completion: <input type="checkbox"/> Pitless adapter 14 Inches above grade			
						15. Well grouted? YES With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 15 ft.			
						16. Nearest source of possible contamination: fr. 20 Direction WEST Type GARAGE Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
						17. 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"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
						(Use a second sheet if needed)			
18. Elevation:		19. Remarks: MR. BEWELL IS HAVING A PLUMBER RUN HIS PUMP				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. CUMMINGS WELL SERV 312 Business name TOPOKTA KAN License No. <input type="checkbox"/> Address TOPOKTA KAN Signed Alan Cummings Date 4/20/81 Authorized representative			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley									

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14
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5