

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

X Location of well:		County Butler	Fraction NW 1/4 NW 1/4 NW 1/4	Section number 21	Township number T 28 S	Range number R 3 E
X Distance and direction from nearest town or city: Street address of well location if in city:		2 1/2 miles East of the Rose Hill road on 95th St. So. on the south side of the		Owner of well: Bob Miller R#1 Box 118 Douglas, Kansas City, state, zip code:		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: Rose Hill, Kansas		6. Bore hole dia. 11 in. Completion date _____ Well depth 118 ft. 12-31-77		
5. Type and color of material		From		To		7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary
Topsoil		0		2		8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other
Clay		2		15		9. Casing: Material styrene Height: Above or below _____ Threaded ☐ Welded ☒ Surface 12 in. RMP ☐ PVC ☐ Weight _____ lbs./ft. Dia. 5 in. to 118 ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth Gauge No. 200
Brown Shale		15		30		10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot/size .06 Length 48' Set between 70 ft. and 118 ft. Gravel pack? yes Size range of material 1/4-1/8"
Blue Shale		30		118		11. Static water level: _____ mo./day/yr. 70 ft. below land surface Date 12-31-77
						12. Pumping level below land surfaces: _____ 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 ☐ No Date _____
						14. Well head completion: 12 capped ☐ Pitless adapter _____ inches above grade
						15. Well grouted? yes 1-2 fine sand mix With: ☐ Neat cement ☐ Bentonite ☒ Concrete Depth: From 40" ft. to 14 ft.
						16. Nearest source of possible contamination: NONE ft. _____ Direction _____ Type ☒ Well disinfected upon completion? ☒ Yes ☐ No
						17. Pump: ☒ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: ☐ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other
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. Harp Well & Pump 236 Business name Wichita, Kansas License No. _____ Address _____ Signed M. Arnold Date 1-10-78 Authorized representative		
Topography: ☐ Hill ☐ Slope ☐ Upland ☐ Valley		Flat Ground Septic System not installed at this time. No apparent source for contamination.				

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

Form WWC-5