

USE TYPEWRITER OR BALL
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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

1. Location of well:		County <i>Butler</i>	Fraction <i>SE 1/4 SW 1/4 SW 1/4</i>	Section number <i>23</i>	Township number T <i>28</i> S R	Range number <i>3E E/W</i>
2. Distance and direction from nearest town or city: <i>#4 South</i>			3. Owner of well: <i>Bob Miller</i> R.R. or street: <i>R#1 Box 118</i> City, state, zip code: <i>Douglas, Kansas</i>			
4. Locate with "X" in section below:			Sketch map: <i>4 East of the Rose Hill Rd and 47th St. So. Rose Hill, Kansas</i>		6. Bore hole dia. <i>11</i> in. Completion date <i>3-8-77</i> Well depth <i>114</i> ft.	
			7. Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary ☐			
5. Type and color of material			8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other			
			9. Casing: Material <i>steel</i> Height: Above or below Threaded ☐ Welded ☒ Surface <i>12</i> in. RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. <i>5</i> in. to <i>114</i> ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth gage No. <i>200</i>			
			10. Screen: Manufacturer's name <i>Sunflower Plastics</i> Type <i>ethylene</i> Dia. <i>5</i> " Flow gauze <i>0.6</i> Length <i>30 ft</i> Set between <i>74</i> ft. and <i>114</i> ft. Gravel pack? <i>yes</i> size range of material <i>1/4-1/8</i> "			
			11. Static water level: <i>14</i> ft. below land surface Date <i>3-8-77</i> mo./day/yr.			
			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: <i>12 Capped</i> ____ Pitless adapter ____ Inches above grade			
			15. Well grouted? <i>yes</i> With: ____ Neat cement ____ Bentonite ☒ Concrete Depth: From <i>40</i> ft. to <i>14</i> ft. <i>OK</i>			
			16. Nearest source of possible contamination: <i>None</i> 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:			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. Business name <i>Harv Well & Pump</i> License No. <i>236</i> Address <i>Wichita, Kans.</i> Signed <i>M. Arnold</i> Date <i>3-22-77</i> Authorized representative			
19. Remarks: <i>Septic system not installed when the well was drilled.</i> <i>No apparent source for contamination.</i>						

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

Form WWC-5