

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: <u>Butler</u>	Section number: <u>24</u>	Township number: <u>28</u>	Range number: <u>3</u>
2. Distance and direction from nearest town or city: <u>4-W-5-S</u>		3. Owner of well: <u>Robert R Rowland</u> R.R. or street: <u>2117 Arlington Ave</u> City, state, zip code: <u>Flint Michigan 48506</u>			
4. Locate with "X" in section below:		Sketch map:			
5. Type and color of material		6. Bore hole dia. <u>8</u> in. Completion date <u>4/7/79</u> Well depth <u>100</u> ft.			
		7. ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
		8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other			
		9. Casing: Material <u>Plastic</u> Height: Above or below Threaded ☐ Welded <u>92</u> Surface <u>18</u> in. RMP ☒ PVC ☐ Weight <u>100</u> lbs./ft. Dia. <u>6</u> in. to <u>100</u> ft. depth ☒ Well thickness: inches or Dia. <u>6</u> in. to <u>100</u> ft. depth ☒ Gauge No. <u>481286</u>			
		10. Screen: Manufacturer's name <u>SunFlower</u> Type <u>100</u> Dia. <u>6</u> Slot/gauze <u>1/64</u> Length <u>20</u> Set between <u>170</u> ft. and <u>90</u> ft. ft. and <u>90</u> ft. Gravel pack? <u>No</u> Size range of material _____			
		11. Static water level: _____ mo./day/yr. <u>60</u> ft. below land surface Date <u>8/25/78</u>			
		12. Pumping level below land surfaces: <u>65</u> ft. after <u>1</u> hrs. pumping <u>20</u> g.p.m. ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>20</u> g.p.m.			
		13. Water sample submitted: _____ mo./day/yr. ☒ Yes ☐ No Date <u>1/7/79</u>			
		14. Well head completion: _____ ☐ Pitless adapter _____ Inches above grade			
		15. Well grouted? <u>Yes</u> With: ☒ Neat cement ☐ Bentonite ☐ Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.			
		16. Nearest source of possible contamination: _____ ft. <u>280</u> Direction <u>E</u> Type <u>Septic</u> 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			
		(Use a second sheet if needed)			
18. Elevation:		19. Remarks:		20. Water well contractor's certification:	
Topography: ☐ Hill ☐ Slope ☒ Upland ☐ Valley		<u>Owner to install</u> <u>Concret Slab around</u> <u>Well</u>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Winter Well Drill 251A</u> Business name _____ License No. _____ Address <u>P2 Box 30</u> Signed <u>Charlie Whitaker</u> Date <u>1/30/79</u> Authorized representative	

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

Form WWC-5