

36

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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

~~SCA~~ BBC

1. Location of well:		County Brown	Fraction NE 1/4 S 35 NW 1/4 SW NW NW	Section number 35	Township number T 2 S R 17 0/W	Range number
2. Distance and direction from nearest town or city: 2 W 1 S			3. Owner of well: Mrs. Elmer Beer			
Street address of well location if in city: Kiawatha, Ks			R.R. or street: 210 S 7th			
			City, state, zip code: Kiawatha, Ks. 66434			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. 5 in. Completion date 10-2-78 Well depth 54 ft.	
					7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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 checked="" 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 type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Top Soil		0	1	9. Casing: Material PVC Height Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC QUE Weight 2.74 lbs./ft. Dia. 5 in. to 54 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 258		
Brown Clay		1	7	10. Screen: Manufacturer's name Pumped Type PVC Dia. 5" Slab gauze 020 Length 10' Set between 17 ft. and 27 ft. ft. and <input type="checkbox"/> ft. Gravel pack? yes Size range of material 03/60		
Brown Sandy Clay		7	11	11. Static water level: <input type="checkbox"/> mo./day/yr. 15 ft. below land surface Date 10-2-78		
Brown Sand med Gravel		11	12	12. Pumping level below land surfaces: 14 1/2 test <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 5 g.p.m.		
Brown Sandy Clay		12	13	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
Brown Clay		13	22	14. Well head completion: Top cap <input type="checkbox"/> Pitless adapter 24 Inches above grade		
Yellow Med Sand		22	26	15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
Yellow Sandy Clay		26	36	16. Nearest source of possible contamination: #19 ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Gray Clay		36	54	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: 1065 Topography: cm <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: owner to install slab 16. New home site in Brome			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. STRADER DELG CO 182 Business name License No. Address RT 1 Halton, Ks Signed Dale Astum Date 10-3-78 Authorized representative	

changed from 1035

T
2
R
120
W
35
NE SW NW
1/4 1/4 1/4

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

Form WWC-5

BR < 1011