

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Sumner	Township name Gore	Fraction SE$\frac{1}{4}$ SW$\frac{1}{4}$	Section number 4	Town number 30S	Range number 2E
Distance and direction from nearest town or city: 1 mile East of				3 Owner of well: Robert Redinger		
Street address of well location if in city: $\frac{1}{4}$ South of Mulvane, Kansas				Address: R. R. #1 Mulvane, Kansas 67110		
Locate with "X" in section below:			Sketch map: #1			
			4 Well depth: <u>60</u> ft. Date of completion <u>7-17-75</u> Well diameter <u>11</u> in.			
			5 <input 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			
			6 Use: <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> _____			
			7 Casing: Material <u>PVC</u> Height: above/below <u>12</u> in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. Diam. _____ Weight _____ lbs./ft. _____ <u>5</u> in. to <u>60</u> ft. depth! Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth!			
2			Type and color of material		From	To
			Black Dirt		0	2
			Sandy Soil with Clay streaks		2	14
			Blue Shale Fractures		14	60
			8 Screen: Certain-Teed Manufacturer <u>PVC</u> Dia. <u>5"</u> Type <u>PVC</u> Slot/gauze <u>.005</u> Length <u>30</u> Set between <u>30</u> ft. and <u>60</u> ft. _____ Fittings: _____ Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1-1/8"</u>			
			9 Static water level: <u>25</u> ft. below land surface Date <u>7-17-75</u>			
			10 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.			
			11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____			
			12 Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> <input checked="" type="checkbox"/> Inches above grade capped			
			13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite _____ Depth: From <u>0</u> ft. to <u>20</u> ft.			
			14 Nearest source of possible contamination: NONE ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
			15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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			
16 Remarks: elevation			17 Water well contractor's certification:			
No apparent source for contamination. Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			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 License No. _____ Address Wichita, Kansas 67209 Signed <u>M. Arnold</u> Date <u>7-18-75</u> Authorized representative			

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5