

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

1. Location of well:	County Sumner	Fraction 1/4SW 1/4SW 1/4	Section number 35	Township number T 30 S	Range number R 2E E/W
2. Distance and direction from nearest town or city: 5 miles East of Belle Plain 1/8 Street address of well location if in city: North, East side of the road.			3. Owner of well: Rinaldo Lawless R.R. or street: RR#2 City, state, zip code: Belle Plain, Kansas		
4. Locate with "X" in section below: Sketch map: Belle Plain, Kansas			6. Bore hole dia. 11 in. Completion date _____ Well depth 45 ft. 5-17-77		
			7. <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		
			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		
5. Type and color of material			9. Casing: Material Styrene Height: Above or below _____ Threaded _____ Welded gl Surface 12 in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. 5 in. to 45 ft. depth Wall Thickness _____ inches or Dia. _____ in. to _____ ft. depth gage No. 200		
			10. Screen: Manufacturer's name _____ Sunflower Plastic Type Styrene Dia. 5" Slot/gauge 1/16 Length 15' Set between 30 ft. and 45 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/4-1/8"		
			11. Static water level: _____ 15 ft. below land surface Date 5-17-77 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. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____		
14. Well head completion: Capped <input type="checkbox"/> Pitless adapter 12 inches above grade					
15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 40" ft. to 14 ft.			16. Nearest source of possible contamination: Septic Tank ft. 300 Direction North Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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)			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 License No. _____ Address Wichita, Kansas Signed M. Arnold Date 5-26-77 Authorized representative		
18. Elevation:	19. Remarks:		21. Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		

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

Form WWC-5