

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 1/4 SW 1/4 NW 1/4	Section number 1	Township number T 31 S R	Range number 1E E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:	1/4 mile E. of Belle Plaine, Ks. on the E. side of the Rd.		3. Owner of well: Stinnett Foundry 508 Industrial Belle Plaine, Kansas		
4. Locate with "X" in section below:	Sketch map: Belle Plaine, Kansas			6. Bore hole dia. 11 in. Completion date Well depth 40 ft. 5-15-78	
				7. 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 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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
5. Type and color of material			From	To	9. Casing: Mate <u>styrene</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 40 ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. 200
Topsoil		0	3	10. Screen: Manufacturer's name Sunflower Plastic	
Clay		3	10	Type styrene Dia. 5" Slot/gap .06 Length 20' Set between 20 ft. and 40 ft. _____ ft. and _____ ft.	
Fine Sand		10	18	Gravel pack? yes Size range of material 1/4-1/8"	
Medium Sand		18	25	11. Static water level: _____ mo./day/yr. 15 ft. below land surface Date 5-15-78	
Gray Shale		25	40	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? <u>yes</u> 1-2 Fine Sand Mix 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: City ft. 150 Direction South Type Sewer 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)					
18. Elevation:	19. Remarks: Flat Ground			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.	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	Well to be used for sprinkler system.			Harp Well & Pump 236 Business name License No. Address Wichita, Kansas 67209 Signed M. Arnold Date 9-14-78 Authorized representative	

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

Form WWC-5