

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 NE 1/4 | Section number 8 | Township number T 31 S R 1E E/W | Range number |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: 1 West of the Belle Plaine Y, & 1 3/10 South of | | | 3. Owner of well: Eldon L. Sickles Address: 2721 West 18th City, state, zip code: Wichita, Kansas | | | |
| 4. Locate with "X" in section below: | | Sketch map: 81 hyway on the east side of the road. Belle Plaine, Kansas | | | 6. Bore hole dia. <u>11</u> in. Completion date _____ Well depth <u>60</u> ft. <u>10-10-77</u> | |
| | | | | | 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 <u>styrene</u> Height: Above <u>of bench/</u> Threaded _____ Welded <u>gl</u> Surface _____ <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>200</u> | |
| | | | | | 10. Screen: Manufacturer's name _____ Sunflower Plastic Type <u>styrene</u> Dia. <u>5"</u> Slot/gauge <u>06</u> Length <u>40'</u> Set between <u>20</u> ft. and <u>60</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> yes Size range of material <u>1/2-1/8"</u> | |
| Topsoil | | From 0 To 3 | | | 11. Static water level: _____ mo./day/yr. <u>15</u> ft. below land surface Date <u>10-10-77</u> | |
| Clay | | From 3 To 12 | | | 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. | |
| Fine Sand | | From 12 To 21 | | | 13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____ | |
| Grey Shale | | From 21 To 60 | | | 14. Well head completion: _____ <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade | |
| | | | | | 15. Well grouted? <input checked="" type="checkbox"/> yes <u>1-2 fine sand mix</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>40'</u> ft. to <u>14</u> ft. | |
| | | | | | 16. Nearest source of possible contamination: <u>NONE</u> ft. _____ Direction _____ <input checked="" type="checkbox"/> type _____ Well disinfected upon completion? <input 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 Septic System not installed at this time. No apparent source for contamination. | | | 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 <u>236</u> Business name License No. Address Wichita, Kansas Signed <u>M. Arnold</u> Date <u>10-11-77</u> Authorized representative | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | |

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

Form WWC-5