

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 Cowley Fraction NE 1/4 NE 1/4 NE 1/4 Section number 10 Township number T 31 S R 5 Range number (E/W)	
2. Distance and direction from nearest town or city: 5 No. 1. E. OP NEWSALEM	
3. Owner of well: NORRIS JOHNSON R.R. or street: 1908 E. SUNRISE City, state, zip code: WICHITA, KS 67216	
4. Locate with "X" in section below: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> </div> <div> <p>Sketch map: TRAILER</p> </div> </div>	
6. Bore hole dia. 8 3/4 in. Completion date 8-25-78 Well depth 100 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	
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	
9. Casing: Material PVC Height: (above) or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 16 in. RMP <input type="checkbox"/> PVC OK Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 90 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 259	
10. Screen: Manufacturer's name M.P.I. Type P.V.C. Dia. 5 10 gauze 25/1000 Length 10 Set between 90 ft. and 100 ft. ft. and <input type="checkbox"/> ft. Gravel pack? yes Size range of material 5/8	
11. Static water level: <input type="checkbox"/> mo./day/yr. 30 ft. below land surface Date 8-25-78	
12. Pumping level below land surfaces: <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 1/2 g.p.m.	
13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date 8-25-78	
14. Well head completion: CAP <input type="checkbox"/> Pitless adapter 10 Inches above grade	
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.	
16. Nearest source of possible contamination: ft. 600 Direction W Type septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:
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. Prewitt Const 353 Business name BOX 44 License No. Address Ant. C. Prewitt Signed Ant. C. Prewitt Date 8-25-78 Authorized representative	

T 31
 R 5
 W (E)
 Sec 10
 1/4 1/4 1/4
 NEWSALEM

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

Farm WWC-5