

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 <b>Cowley</b>	Township name	Fraction <b>NW 1/4 NE 1/4 NW 1/4</b>	Section number <b>7</b>	Town number <b>315</b>	Range number <b>6 E</b>																																													
Distance and direction from nearest town or city: Street address of well location if in city: <b>4N 3 3/4 W - Burden</b>				3 Owner of well: Address: <b>GARY Foust RFD Burden</b>																																															
Locate with "X" in section below: N W E S 1 Mile			Sketch map: Slope BARN New Well 60' 250' Dug Well House Slope GAS TANK Chicken House		4 Well depth: <b>150</b> ft. Date of completion <b>12-16-75</b> Well diameter <b>10</b> in.																																														
2 Type and color of material <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Type and color of material</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr><td>Soil + clay</td><td>0</td><td>4</td></tr> <tr><td>Lime</td><td>4</td><td>7</td></tr> <tr><td>Shale grey-green</td><td>7</td><td>14</td></tr> <tr><td>Lime (white)</td><td>14</td><td>20</td></tr> <tr><td>Shale (grey)</td><td>20</td><td>28</td></tr> <tr><td>Lime (grey)</td><td>28</td><td>30</td></tr> <tr><td>Shale (grey)</td><td>30</td><td>32</td></tr> <tr><td>timbered Rock</td><td>32</td><td>36</td></tr> <tr><td>Lime (grey)</td><td>36</td><td>86</td></tr> <tr><td>Shale (grey to brown)</td><td>86</td><td>98</td></tr> <tr><td>Lime (white)</td><td>98</td><td>116</td></tr> <tr><td>Shale (grey)</td><td>116</td><td>122</td></tr> <tr><td>Lime (grey)</td><td>122</td><td>128</td></tr> <tr><td>Shale - with - thin lime layers (grey)</td><td>128</td><td>150</td></tr> </tbody> </table>			Type and color of material	From	To	Soil + clay	0	4	Lime	4	7	Shale grey-green	7	14	Lime (white)	14	20	Shale (grey)	20	28	Lime (grey)	28	30	Shale (grey)	30	32	timbered Rock	32	36	Lime (grey)	36	86	Shale (grey to brown)	86	98	Lime (white)	98	116	Shale (grey)	116	122	Lime (grey)	122	128	Shale - with - thin lime layers (grey)	128	150	5 <input checked="" type="checkbox"/> Cable tool <input 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 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"/> Commercial <input type="checkbox"/> Test well	
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7 Casing: Material <b>PVC</b> Height: <b>above</b> below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>1 1/8"</b> Diam. <b>10</b> in. to <b>17</b> ft. depth! Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>10</b> in. to <b>17</b> ft. depth!		8 Screen: Manufacturer <b>NONE</b> Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ Fittings: Gravel pack <input type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____		9 Static water level: <b>49</b> ft. below land surface Date <b>12-22-75</b>																																															
10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>2</b> g.p.m.		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade																																															
13 Well grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <b>0</b> ft. to <b>16</b> ft.		14 Nearest source of possible contamination: ft. <b>50</b> Direction <b>SE</b> Type <b>GAS TANK</b> Well disinfected upon completion? <input 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 <b>Hillside</b> <b>Sloping to So.</b> Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley <b>Well owner knows of reg. requirements &amp; agrees to send in sample &amp; run cement slab after lines are installed to well.</b>			17 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. <b>Bailey Drill Co. 209</b> Business name _____ License No. _____ Address <b>Burden</b> Signed <b>Donald Bailey</b> 12/16/75 Authorized representative																																																

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

Form WWC-5

*Gary Foust*