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	Township name	Fraction	Section number	Town number	Range number
	ELK	GREENFIELD	SE 1/4	3	31	R9 E

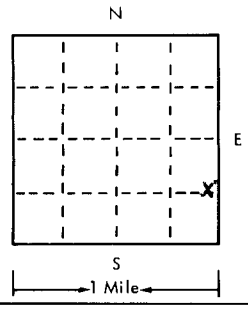
Distance and direction from nearest town or city: 5 MILES WEST 1 1/2 N

Street address of well location if in city: TYOLINE KS

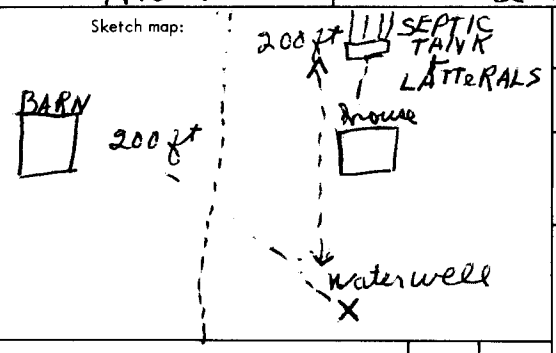
3 Owner of well: GARY RIERSON

Address: ROUTE 1 GRENOLA KANS 67346

Locate with "X" in section below:



Sketch map:



4 Well depth: 130 ft. Date of completion 9-24-95
Well diameter 7 in.

5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐ _____

7 Casing: Material _____ Height: above/below
Threaded ☐ Welded ☐ Surface _____ in.
Diam. Weight _____ lbs./ft.
____ in. to ____ ft. depth Drive shoe? ☐ Yes ☐ No
____ in. to ____ ft. depth

2

Type and color of material	From	To
TOP. SOIL	0	7
LIGHT. GREY SHALE	7	60
DARK. GREY SHALE	60	125
LIGHT. GREY SHALE	125	130
Well was plugged		
(use a second sheet if needed)		

8 Screen:
Manufacturer _____
Type _____ Dia. _____
Slot/gauze _____ Length _____
Set between ____ ft. and ____ ft.
Fittings:
Gravel pack ☐ Yes ☐ No Size range of material ____

9 Static water level: Dry
____ ft. below land surface Date _____

10 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.

11 Water sample submitted:
☐ Yes ☐ No Date _____

12 Well head completion:
☐ Pitless adapter ☐ Inches above grade

13 Well grouted? ☐ Yes ☐ No
☐ Neat cement ☐ Bentonite ☐ _____
Depth: From ____ ft. to ____ ft.

14 Nearest source of possible contamination:
ft. _____ Direction _____ Type _____
Well disinfected upon completion? ☐ Yes ☐ No

15 Pump: ☐ Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts ____
Length of drop pipe ____ ft. capacity ____ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Certrifugal ☐ Other

16 Remarks: elevation
cement plug 70 ft to 80 ft
Cement plug 1 ft to 12 ft

Topography:
☒ Hill
☐ Slope
☐ Upland
☐ Valley

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.
WIKE WELL DRILLING 122
Business name License No.
Address Augusta Kans
Signed Murray Wike Date
Authorized representative 9-24-95

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

Form WWC-5

677-H