

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 COWLEY	Township name VERNON	Fraction NE⁴NW⁴	Section number 29	Town number 32	Range number 3
Distance and direction from nearest town or city: <i>6 mi. west of Winfield Kansas</i>			3 Owner of well: TERRY LAWRENCE			
Street address of well location if in city: <i>R#1 Oxford, Kansas 67119</i>			Address: R#1 OXFORD, KANSAS 67119			
Locate with "X" in section below:		Sketch map:		4 Well depth: 26' 6" ft. Date of completion 5-24-79 Well diameter 4" in.		
		5 <input 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 checked="" 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 <input type="checkbox"/> _____		
				7 Casing: Material PLY Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18" Diam. _____ Weight 4.22 lbs./ft. _____ 4 in. to 22' ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth		
2 Type and color of material				From	To	8 Screen:
<i>Sandy Soil</i>				<i>1</i>	<i>10</i>	Manufacturer RUTH-BERRY
<i>Fine Sand</i>				<i>11</i>	<i>20</i>	Type FILTER-PAK 4"
<i>Medium Sand</i>				<i>21</i>	<i>26'</i>	Slot/gauze _____ Length 4'
<i>Shale</i>						Set between 18' 4" ft. and _____ ft. 22' 6"
						Fittings: COARSE SAND
						Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____
						9 Static water level: 4 ft. below land surface Date 5-24-79
						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: <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 1 ft. to 10 ft.
						14 Nearest source of possible contamination: ft. 500' Direction SE Type HOG PEN Well disinfected upon completion? <input checked="" 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.p.m. Type: <input checked="" 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 <i>Owner wished to complete well himself with a pitless adapter and a submersible pump. Well to be used for residence and to water livestock.</i>				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. HUNT DRILLING Co 249 Business name License No. _____ Address R#1 ARKANSAS CITY, KS Signed <i>Walter Hunt</i> Date 6-8-79 Authorized representative		

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

Form WWC-5