

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 <u>Cowley</u> Fraction <u>SE 1/4 SE 1/4 SE 1/4</u> Section number <u>27</u> Township number <u>T 32 S R 4</u> Range number <u>EW</u>	
2. Distance and direction from nearest town or city: <u>In Town</u> 3. Owner of well: <u>Raymond Walker</u> Street address of well location if in city: <u>1517 Fuller, Winfield</u> R.R. or street: <u>1517 Fuller</u> City, state, zip code: <u>Winfield, KS 67156</u>	
4. Locate with "X" in section below: Sketch map:	
5. Type and color of material	
	From To
<u>Red Clay</u>	<u>0</u> <u>18</u>
<u>Course Gravel</u>	<u>18</u> <u>22</u>
<u>Limestone</u>	<u>22</u> <u>32</u>
6. Bore hole dia. <u>6</u> in. Completion date <u>5-21-79</u> Well depth <u>22</u> ft.	
7. <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	
8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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 <u>RMP</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>155</u> lbs./ft. Dia. <u>6</u> in. to <u>32</u> ft. depth Wall Thickness: <u>igghs</u> or Dia. <u> </u> in. to <u> </u> ft. depth Gauge No. <u>14</u>	
10. Screen: Manufacturer's name <u>Sunflower</u> Type <u>RMP</u> Dia. <u>6"</u> Slot/gauze <u>1/16</u> Length <u>10"</u> Set between <u>22</u> ft. and <u>32</u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>5/8"</u>	
11. Static water level: <u>20</u> ft. below land surface Date <u>5-21-79</u> mo./day/yr.	
12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>2 1/2</u> g.p.m.	
13. Water sample submitted: <u> </u> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u> </u>	
14. Well head completion: <u> </u> Pitless adapter <u>12</u> Inches above grade	
15. Well grouted? <u>Yes</u> With: <u> </u> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete <input type="checkbox"/> Depth: From <u>0</u> ft. to <u>10</u> ft.	
16. Nearest source of possible contamination: <u>NA</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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 type="checkbox"/> Upland <input checked="" 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. <u>Eastman Drilling 299</u> Business name <u> </u> License No. <u> </u> Address <u>P.O. Box 115 Winfield</u> Signed <u>Dale Eastman</u> Date <u>5-21-79</u> Authorized representative	

32-40-27
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5