

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 SW 1/4 SE 1/4 SW 1/4	Section number 15	Township number T 33 S R 4 EW	Range number
2. Distance and direction from nearest town or city: 5 miles SE of Winfield			3. Owner of well: D. R. Shields			
Street address of well location if in city:			R.R. or street: R.R. 3			
			City, state, zip code: Winfield, KANSAS 67156			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 10 in. Completion date 11-23-77 Well depth 80 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 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 RMP Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 14 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight 155/100 lbs./ft. Dia. 6 in. to 80 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 1/8"		
5. Type and color of material		From	To	10. Screen: Manufacturer's name Sunflower		
Clay		0'	10'	Type RMP Dia. 6" Slot/gauze 1/16" Length 10 Set between 70 ft. and 80 ft. ft. and <input type="checkbox"/> ft.		
lime		10'	15'	Gravel pack? yes Size range of material 3/8		
Clay		15'	30'	11. Static water level: _____ mo./day/yr. 50 ft. below land surface Date 11-23-77		
Schale		30'	50'	12. Pumping level below land surfaces: N/A ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 3 g.p.m.		
lime		50'	60'	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
Schale		60'	80'	14. Well head completion: yes N/A <input type="checkbox"/> Well adapter 14 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 11 ft.		
				16. Nearest source of possible contamination: ft. 170 Direction NE Type Privy Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name Myers Model number 52952 HP 1/2 Volts 110 Length of drop pipe 76 ft. capacity 9 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		
				(Use a second sheet if needed)		
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		Old well is to be maintained		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. EASTMAN Drilling 299 Business name _____ License No. _____ Address P.O. Box 115, Winfield Signed D. Eastman Date 11-23 Authorized representative		

33-40-15
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 SW SE SW
 1/4 1/4 N 4

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

Form WWC-5