

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 WASHINGTON	Fraction N 1/4 SW 1/4 S 1/4	Section number 1	Township number T 3 S R 2	Range number 2 E/W
2. Distance and direction from nearest town or city: 2 1/2 S - 1/2 E			3. Owner of well: FRANK H. DURST			
Street address of well location if in city: 1/4 N MORROWVILLE			R.R. or street: RR # 1			
			City, state, zip code: WASHINGTON, KANS 66968			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 8 in. Completion date _____		
				Well depth 179 ft. 7/6/76		
				7. <input type="checkbox"/> Cable tool <input checked="" 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		
5. Type and color of material		From		To		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 PVC Height: Above or below
						Threaded _____ Welded <input checked="" type="checkbox"/> Surface 15 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 2 lbs./ft. Dia. 5 in. to 179 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 1214
						10. Screen: Manufacturer's name _____
						Type PVC Dia. 5"
						Slot gauze 1/4" Length 20'
						Set between 159 ft. and 179 ft.
						ft. and _____ ft.
						Gravel pack? <input checked="" type="checkbox"/> YES Size range of material 5X4
						11. Static water level: _____ mo./day/yr.
						60 ft. below land surface Date 7/6/76
						12. Pumping level below land surface
						_____ ft. after _____ hrs. pumping _____ g.p.m.
						_____ ft. after _____ hrs. pumping _____ g.p.m.
						Estimated maximum yield _____ g.p.m.
						13. Water sample submitted: _____ mo./day/yr.
						Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____
						14. Well head completion:
						<input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> _____ inches above grade
						15. Well grouted? <input checked="" type="checkbox"/> YES
						With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete
						Depth: From 0 ft. to 10 ft.
						16. Nearest source of possible contamination: OVERHEAD
						ft. 30 Direction NORTH Type GAS TANK
						Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. 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 type="checkbox"/> Submersible <input type="checkbox"/> Turbine
						<input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating
						<input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
18. Elevation: 700		19. Remarks:		20. Water well contractor's certification:		
Topography:				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
<input type="checkbox"/> Hill				GEOLox + SONS INC 258		
<input type="checkbox"/> Slope				Business name _____ License No. _____		
<input checked="" type="checkbox"/> Upland				Address CLIFTON, KANS		
<input type="checkbox"/> Valley				Signed Nancy Cox Date 7/6/76		
				Authorized representative		

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

Form WWC-5