

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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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 SW 1/4 SW 1/4 NW 1/4	Section number 15	Township number 3 South	Range number R 5 East	E/W
2. Distance and direction from nearest town or city:		to 15 E and 7 mi South & on east side road		Nearest town or city: Hanover 1/2 mi east		Owner of well: Jessie Perkins	
3. Street address of well location in city:				R.R. or street: RR 1		City, state, zip code: Hanover Kans	
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. _____ in. Completion date _____		Well depth 91 ft. 10-12-79	
				7. <input checked="" type="checkbox"/> Cable tool _____ Rotary _____ Driven _____ Dug _____		<input type="checkbox"/> Hollow rod _____ Jetted _____ Bored _____ Reverse rotary _____	
5. Type and color of material				8. Use: <input checked="" type="checkbox"/> Domestic _____ Public supply _____ Industry _____		<input type="checkbox"/> Irrigation _____ Air conditioning _____ Stock _____ <input type="checkbox"/> Lawn _____ Oil field water _____ Other _____	
				9. Casing: Material galv Height: (Above or below) _____		Threaded <input checked="" type="checkbox"/> Welded _____ Surface 24 in.	
				RMP _____ PVC _____ Weight _____ lbs./ft.		Dia. 7 in. to 51 ft. depth; Wall thickness 231	
				Dia. 5 in. to 91 ft. depth; gage 267		Wall	
				10. Screen: Manufacturer's name CanTex			
				Type P.V.C. Dia. 5"			
				Slot/gauze .040 Length 39			
				Set between 91 ft. and 91 ft.			
				Gravel pack? <input checked="" type="checkbox"/> Size range of material 4X4			
				11. Static water level: _____ mo./day/yr.			
				71 ft. below land surface Date 10-12-79			
				12. Pumping level below land surfaces:			
				_____ ft. after _____ hrs. pumping _____ g.p.m.			
				_____ ft. after _____ hrs. pumping _____ g.p.m.			
				Estimated maximum yield 20 g.p.m.			
				13. Water sample submitted: _____ mo./day/yr.			
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
				14. Well head completion: NA			
				_____ Pitless adapter _____ Inches above grade			
				15. Well grouted? <input checked="" type="checkbox"/> _____			
				With: _____ Neoprene _____ Bentonite _____ <input checked="" type="checkbox"/> Concrete			
				Depth: From 71 ft. to 180 ft.			
				16. Nearest source of possible contamination:			
				ft. 100 Direction South Type Privy			
				Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____			
				17. Pump: _____ Not installed			
				Manufacturer's name _____			
				Model number _____ HP _____ Volts _____			
				Length of drop pipe _____ ft. capacity _____ g.p.m.			
				Type: _____			
				<input type="checkbox"/> Submersible _____ Turbine _____			
				<input type="checkbox"/> Jet _____ Reciprocating _____			
				<input type="checkbox"/> Centrifugal _____ Other _____			
18. Elevation:		19. Remarks:		20. Water well contractor's certification:			
Topography:				This well was drilled under my jurisdiction and this report			
<input type="checkbox"/> Hill				is true to the best of my knowledge and belief			
<input checked="" type="checkbox"/> Slope				Strader Drilling Co 237			
<input type="checkbox"/> Upland				Business name _____ License No. _____			
<input type="checkbox"/> Valley				Address Blue Rapids KS			
				Signature Harold Strader Date 10-12-79			
				Authorized Representative			

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

Form WWC-5

T - W
 R - SE
 W - E
 Sec 15
 S 237
 W 1/4
 E 1/4
 NW 1/4