

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 SW 1/4 SW 1/4 NW 1/4	Section number 22	Township number T 4 S R 2	Range number 2
2. Distance and direction from nearest town or city: 6 W - 1/2 N Street address of well location if in city: LINN			3. Owner of well: LEROY HERRS R.R. or street: ROUTE 2 City, state, zip code: LINN KANS 66953			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 8 in. Completion date _____ Well depth 159 ft. 2-8-78		
				7. <input checked="" 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		
				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		
5. Type and color of material		From	To	9. Casing: Material PVC Height: 0 above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 3 lbs./ft. Dia. 5 in. to 159 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 258		
				10. Screen: Manufacturer's name _____ PUMPCO Type PVC Dia. 5 Slot gauze 1/16 Length 20 Set between 139 ft. and 159 ft. _____ ft. and _____ ft. Gravel pack? YES Size range of material 28x14		
				11. Static water level: _____ mo./day/yr. 60 ft. below land surface Date 2-8-78		
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after NA hrs. pumping _____ g.p.m. Estimated maximum yield 50 g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter 12 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 10 ft.		
				16. Nearest source of possible contamination: SEPTIC ft. 200 Direction E Type LATERALS 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		
		(Use a second sheet if needed)				
18. Elevation: 144' Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input 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. DARYL COX & SONS INC 359 Business name _____ License No. _____ Address LIFTON, KANS 66937 Signed Daryl Cox Date 2-9-78 Authorized representative		

7-20-78
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 SUBSUNW

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

Form WWC-5