

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

NW NE SW

1. Location of well: County <u>Marshall</u>		Fraction <u>NW 1/4</u>		Section number <u>17</u>		Township number <u>T 4 S R 9 E</u>		Range number <u>9 E</u>	
2. Distance and direction from nearest town or city: <u>Frankfort 1/4 3/4 mi west</u>				3. Owner of well: <u>Mrs Ida Schillen</u> R.R. or street: <u>Frankfort Kans</u> City, state, zip code:					
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. <u>18</u> in. Completion date <u>Dec 5-75</u> Well depth <u>55</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					
5. Type and color of material				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 <u>PVC</u> Height: (Above or below) Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input checked="" type="checkbox"/> <u>18</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>160</u> lbs./ft. Dia. <u>5</u> in. to <u>55</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>160</u>					
				10. Screen: Manufacturer's name <u>Pumpco</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>.030</u> Length <u> </u> Set between <u>49</u> ft. and <u>55</u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4" X 1/2"</u>					
				11. Static water level: <u>35</u> ft. below land surface Date <u>12-5-75</u> mo./day/yr.					
				12. Pumping level below land surfaces: <u>Baler test</u> <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>20</u> g.p.m.					
				13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>					
				14. Well head completion: <u>Casing 18" above ground</u> <input type="checkbox"/> Pitless adapter <u> </u> Inches above grade					
				15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>10</u> ft. to <u>0</u> ft.					
				16. Nearest source of possible contamination: <u>150</u> ft. Direction <u>SW</u> Type <u>Sewer</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					
				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>Harold Stader Drilling Co</u> Business name <u>Blue Rapids</u> License No. <u>237</u> Address <u> </u> Signed <u>Harold Stader</u> Date <u>12-5-75</u> Authorized representative					
18. Elevation: <u>1190</u>		19. Remarks:		(Use a second sheet if needed)					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley									

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

Form WWC-5