

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

<input checked="" type="checkbox"/> Location of well:	County: <u>Marshall</u>	Fraction: <u>SE 1/4 NE 1/4 NE 1/4</u>	Section number: <u>7</u>	Township number: T <u>5</u> S <u>10</u> E <u>10</u>	Range number: <u>10</u>															
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>5 1/2 m. S of Beloit, Kansas</u>			3. Owner of well: <u>Walter Surdez</u> R.R. or street: City, state, zip code: <u>Frankfort, Kansas</u>																	
<input checked="" type="checkbox"/> Locate with "X" in section below: <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="margin-right: 10px;">Sketch map:</div> </div>			6. Bore hole dia. <u>10</u> in. Completion date: <u>Oct 18-76</u> Well depth <u>35</u> ft.																	
5. Type and color of material <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width:80%;">Type and color of material</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><u>Dirt, Black</u></td> <td><u>0</u></td> <td><u>5</u></td> </tr> <tr> <td><u>Clay, Brown Clay with gravel</u></td> <td><u>5</u></td> <td><u>25</u></td> </tr> <tr> <td><u>Lime Rock, white</u></td> <td><u>25</u></td> <td><u>30</u></td> </tr> <tr> <td><u>Shale, Blue</u></td> <td><u>30</u></td> <td><u>35</u></td> </tr> </tbody> </table>			Type and color of material	From	To	<u>Dirt, Black</u>	<u>0</u>	<u>5</u>	<u>Clay, Brown Clay with gravel</u>	<u>5</u>	<u>25</u>	<u>Lime Rock, white</u>	<u>25</u>	<u>30</u>	<u>Shale, Blue</u>	<u>30</u>	<u>35</u>	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		
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8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other			9. Casing: Material <u>P57</u> Height: <u>above</u> or below Threaded <input type="checkbox"/> Welded <u>Glue</u> Surface <u>48</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>35</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>280</u>																	
11. Static water level: _____ mo./day/yr. <u>15</u> ft. below land surface Date <u>10-18-76</u>			12. Pumping level below land surfaces: _____ 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade																	
15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>5</u> ft. to <u>15</u> ft.			16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>S</u> Type <u>Pond</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 <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>Walter Surdez</u> License No. <u>176</u> Business name _____ Address <u>Frankfort, Mo. 66411</u> Signed <u>Walter Surdez</u> Date <u>10-18-76</u> Authorized representative																	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley			19. Remarks: <u>Concrete slab to be poured by customer</u> <div style="text-align: center; margin-top: 10px;"> </div>																	

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

Form WWC-5