

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 <u>CLAY</u>	Fraction <u>SE 1/4 SW 1/4 NE 1/4</u>	Section number <u>31</u>	Township number T <u>7</u> S R	Range number <u>3</u> <u>EW</u>
2. Distance and direction from nearest town or city: <u>1/2 NORTH</u> Street address of well location if in city: <u>CLAY CENTER</u>			3. Owner of well: <u>REAGNER & SONS</u> R.R. or street: <u>BOX 616</u> City, state, zip code: <u>CLAY CENTER KANS 67432</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>50</u> ft. <u>12-23-77</u>	
				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	
				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"/> Low <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
5. Type and color of material				9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>3</u> lbs./ft. Dia. <u>5</u> in. to <u>50</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>1258</u>	
				10. Screen: Manufacturer's name _____ <u>RUMFORD</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>1/16</u> Length <u>20'</u> Set between <u>30</u> ft. and <u>50</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material <u>4x4</u>	
				11. Static water level: _____ mo./day/yr. <u>10</u> ft. below land surface Date <u>12-23-77</u>	
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after <u>1 1/2</u> 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 <u>12</u> 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 <u>0</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: ft. <u>50</u> Direction <u>E+N</u> Type <u>CREEK</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 _____ 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:		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. <u>Geo Cox & Sons Inc 258</u> Business name _____ License No. _____ Address <u>CLAYTON, KANS 66937</u> Signed <u>Wayne Cox</u> Date <u>12-29-77</u> Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

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

Form WWC-5