

change elev

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

bcc

1. Location of well:	County <b>JACKSON</b>	Fraction <b>SW SW NW</b> <del>1/4</del> <b>1/4 NW 1/4 NW 1/4</b>	Section number <b>24</b>	Township number <b>T 8 S R</b>	Range number <b>15 E</b>
2. Distance and direction from nearest town or city: <b>1.1 E of</b>			3. Owner of well: <b>RICHARD Lewis</b>		
Street address of well location if in city: <b>MAYETTA</b>			City, state, zip code: <b>MAYETTA, KS 66509</b>		
4. Locate with "X" in section below:		Sketch map:			
5. Type and color of material			From	To	
TOP SOIL			0	4	
Clay, BROWN			4	27	
Five Sand-Course Sand			27	30	
shale, grey			30	34	
Lime Stone, grey			34	37	
shale, grey			37	80	
6. Bore hole dia. <b>10</b> in. Completion date <b>9-22-77</b> Well depth <b>80</b> ft.					
7. 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					
9. Casing: Material <b>PVC</b> Height: <b>24</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>24</b> in. RMP <input type="checkbox"/> PVC <b>9L</b> Weight <b>250</b> lbs./ft. <b>2.74</b> mpc Dia. <b>5</b> in. to <b>80</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>27-258</b>					
10. Screen: Manufacturer's name <b>Pumpco, MPI</b> Type <b>PVC</b> Dia. <b>5</b> Slot/gauze <b>.020</b> Length <b>20</b> Set between <b>25</b> ft. and <b>75</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>0.30x0.60</b>					
11. Static water level: <input type="checkbox"/> mo./day/yr. <b>23</b> ft. below land surface Date <b>9-22-77</b>					
12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>2</b> g.p.m.					
13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date					
14. Well head completion: <b>Cap</b> <input type="checkbox"/> Pitless adapter <b>24</b> Inches above grade					
15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>5</b> ft. to <b>15</b> ft.					
16. Nearest source of possible contamination: ft. <b>80</b> Direction <b>N</b> Type <b>Creek</b> 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: <b>1150</b>		19. Remarks: <b>OWNER TO INSTAL SLAB</b>			
Topography: <b>1142</b> <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		<b>Rm</b>			
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. <b>STADER DRIG CO INC. 182</b> Business name _____ License No. _____ Address <b>Holtan, KS</b> Signed <b>Dale Adams</b> Date <b>9-22-77</b> Authorized representative					

8  
 150  
 24  
 1/4 1/4 1/4 1/4

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

Form WWC-5