

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>Clay</u>	Fraction <u>NW 1/4 NW 1/4 NE 1/4</u>	Section number <u>12</u>	Township number T <u>8</u> S R	Range number <u>32 EW</u>															
<input checked="" type="checkbox"/> Distance and direction from nearest town or city: <u>3/4 W of</u>	3. Owner of well: <u>Harold Franke</u>		R.R. or street: <u>#1</u>																	
Street address of well location if in city: <u>Clay Center</u>		City, state, zip code: <u>Clay Center Kansas</u>																		
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <u>32</u> in. Completion date _____																	
			Well depth <u>60</u> ft. <u>4-15-77</u>																	
			7. <input 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 checked="" type="checkbox"/> Reverse rotary																	
5. Type and color of material			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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																	
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><u>top soil + clay</u></td> <td><u>0</u></td> <td><u>26</u></td> </tr> <tr> <td><u>sand + gravel</u></td> <td><u>26</u></td> <td><u>32</u></td> </tr> <tr> <td><u>gravel</u></td> <td><u>32</u></td> <td><u>60</u></td> </tr> <tr> <td><u>shale</u></td> <td><u>60</u></td> <td><u>'</u></td> </tr> </tbody> </table>				From	To	<u>top soil + clay</u>	<u>0</u>	<u>26</u>	<u>sand + gravel</u>	<u>26</u>	<u>32</u>	<u>gravel</u>	<u>32</u>	<u>60</u>	<u>shale</u>	<u>60</u>	<u>'</u>	9. Casing: Material <u>AC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> " in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>34</u> lbs./ft. Dia. <u>16</u> in. to <u>60</u> ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>34</u> "		
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10. Screen: Manufacturer's name <u>Johnson</u> <u>Concrete</u> Type <u>transit</u> Dia. <u>16</u> Slot/gauge <u>1/8</u> " Length <u>26</u> Set between <u>34</u> ft. and <u>60</u> ft. ft. and _____ ft. Gravel pack? <u>YES</u> Size range of material <u>1/8-1/4</u> "																				
11. Static water level: _____ mo./day/yr. <u>30</u> ft. below land surface Date <u>4-15-77</u>																				
12. Pumping level below land surfaces: <u>55</u> ft. after <u>1/2</u> hrs. pumping <u>700</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>700</u> 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? <u>YES</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.																				
16. Nearest source of possible contamination: <u>NONE</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																				
17. Pump: <input checked="" type="checkbox"/> Not installed <u>note</u> Manufacturer's name _____ 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	19. Remarks: <u>Installation hasn't been completed</u> <u>waiting to decide on pump to use</u> <u>this well + well south together</u>																			
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</u> <u>258</u> Business name License No. Address <u>Francis Cox</u> Signed <u>Chilton Kansas</u> Date <u>4-15</u> Authorized representative																				

8
 20
 W
 12
 NW 1/4 NE 1/4
 Sec 1/4 1/4 1/4

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

Form WWC-5