

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 CLAY	Fraction SW 1/4 NE 1/4 SW 1/4	Section number 13	Township number T 8 S R	Range number 20 EW
<input checked="" type="checkbox"/> Distance and direction from nearest town or city: 1 S 1 W	Street address of well location if in city: CLAY CENTER		3. Owner of well: GLEN CARLSON R.R. or street: ROUTE 5 City, state, zip code: CLAY CENTER, KANS 67432		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 8 in. Completion date _____ Well depth 35 ft. 2-1-78	
				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"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
5. Type and color of material		From To		9. Casing: Material PVC Height Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface 60 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 3 lbs./ft. Dia. 5 in. to 35 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 1258	
				10. Screen: Manufacturer's name _____ PUMPCO Type PVC Dia. 5 Slot gauge 1/4 Length 20' Set between 15 ft. and 35 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material 18x4	
				11. Static water level: _____ mo./day/yr. 10 ft. below land surface Date 2-1-78	
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after N/A hrs. pumping _____ g.p.m. Estimated maximum yield 50 g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter 60 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 0 ft. to 10 ft.	
				16. Nearest source of possible contamination: SEPTIC ft. 400 Direction SOUTH Type TANK 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. JARVIS COX + SONS INC-359 Business name _____ License No. _____ Address CLAYTON KANS 66937 Signed Jarvis Cox Dgte _____ Authorized representative 2-1-78		
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