

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 820-1201-1215

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

1. Location of well:		County <b>Clay</b>	Fraction <b>NW 1/4 NW 1/4 SW 1/4</b>	Section number <b>17</b>	Township number <b>T 8 S R 2 E</b>	Range number <b>2 E</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:			
<b>5 W 1 S</b> <b>Clay Center</b>			<b>Gerry Fraser</b> <b>#1</b> <b>Clay Center, Ks 67432</b>			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <b>8</b> in. Completion date <b>6-7-79</b> Well depth <b>62</b> ft.	
					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	
					9. Casing: Material <b>PVC</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>3</b> lbs./ft. Dia. <b>5</b> in. to <b>62</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>058</b>	
5. Type and color of material				From	To	10. Screens: Manufacturer's name
<b>Clay</b>				<b>0</b>	<b>22</b>	<b>Pumper Supply</b>
<b>sand</b>				<b>22</b>	<b>28</b>	Type <b>PVC</b> Dia. <b>5</b>
<b>sand rock gravel</b>				<b>28</b>	<b>34</b>	Slot/gauge <b>1/16"</b> Length <b>10</b>
<b>Clay</b>				<b>34</b>	<b>48</b>	Set between <b>52</b> ft. and <b>62</b> ft. ft. and <input type="checkbox"/> ft.
<b>lime rock</b>				<b>48</b>	<b>49</b>	Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8-1/4"</b>
<b>Clay</b>				<b>49</b>	<b>56</b>	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>32</b> ft. below land surface Date <b>6-7-79</b>
<b>lime rock</b>				<b>56</b>	<b>57</b>	12. Pumping level below land surfaces: <b>53</b> ft. after <b>12</b> hrs. pumping <b>7</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>7-9</b> g.p.m.
<b>Clay</b>						13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
<b>lime rock</b>						14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade
<b>Clay</b>						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>0</b> ft. to <b>10</b> ft.
						16. Nearest source of possible contamination: <b>none</b> ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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.		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				<b>Cox-Beswick</b> <b>361</b> Business name License No. <b>Clifton, Kansas 66937</b> Address <b>Fraser, Co</b> Date <b>6-8-79</b> Signed <b>Fraser, Co</b> Authorized representative		

T 8 S R 2 E  
W 5  
S 17  
N 1/4 NW 1/4 SW 1/4

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

Form WWC-5