

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 SE 1/4 <u>NW 1/4 SE 1/4 SE 1/4</u>	Section number <u>9</u>	Township number <u>T 8 S</u>	Range number <u>R 3 E</u>
2. Distance and direction from nearest town or city: <u>east side of clay center</u>			3. Owner of well: <u>Gary Wilson</u>			
Street address of well location if in city: <u>clay center</u>			R.R. or street: <u>R.R. 3</u>			
			City, state, zip code: <u>Clay Center Kans</u>			
4. Locate with "X" in section below:			Sketch map:		6. Bore hole dia. <u>1 1/2</u> in. Completion date <u>10-20-76</u>	
					Well depth <u>64</u> ft.	
					7. <input checked="" 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 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 <u>STEEL</u> Height: <u>Above</u> or below	
					Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <u>1 1/8</u> in.	
					RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>24</u> lbs./ft.	
					Dia. <u>3 1/2</u> in. to <u>30</u> ft. depth Wall Thickness: <u>2 3/8</u> in.	
					Dia. <u>5</u> in. to <u>64</u> ft. depth gage No. <u>Warp</u>	
5. Type and color of material			From	To	10. Screen: Manufacturer's name <u>Pumuck M.P.I.</u>	
<u>top soil</u>			<u>1</u>	<u>6</u>	Type <u>P.V.C.</u> Dia. <u>3</u>	
<u>Clay Sandy Blue</u>			<u>6</u>	<u>48</u>	Slot/gage <u>1025</u> Length <u>20</u>	
<u>Sandy gravel</u>			<u>48</u>	<u>50</u>	Set between <u>64</u> ft. and <u>44</u> ft.	
<u>Rock limestone</u>			<u>50</u>	<u>53</u>	ft. and _____ ft.	
<u>Blue shale</u>			<u>53</u>	<u>64</u>	Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8</u>	
					11. Static water level: _____ mo./day/yr.	
					<u>40</u> ft. below land surface Date <u>10-20-76</u>	
					12. Pumping level below land surfaces:	
					_____ ft. after _____ hrs. pumping _____ g.p.m.	
					_____ ft. after _____ hrs. pumping _____ g.p.m.	
					Estimated maximum yield <u>10</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: <u>NA</u>	
					<input type="checkbox"/> Pitless adapter _____ Inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> <u>1-2</u>	
					With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete	
					Depth: From <u>18</u> ft. to <u>5</u> ft.	
					16. Nearest source of possible contamination:	
					ft. <u>200</u> Direction <u>east</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:		
Topography:				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
<input type="checkbox"/> Hill				<u>Strader Drilling Co #37</u>		
<input type="checkbox"/> Slope				Business name _____ License No. _____		
<input type="checkbox"/> Upland				Address <u>Blue Rapids</u>		
<input checked="" type="checkbox"/> Valley				Signed <u>Harold Strader</u> Date <u>10-20-76</u>		
				Authorized representative		

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

Form WWC-5

8-3-76
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 BUSINESS