

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 <b>CLAY</b>	Fraction <b>NW 1/4 SE 1/4 SW 1/4</b>	Section number <b>33</b>	Township number <b>9 South</b>	Range number <b>1 East</b>
2. Distance and direction from nearest town or city: <b>Oak Hill</b> <b>1 3/4 mi South 1/2 mi East</b>			3. Owner of well: <b>Matthew Davidson</b> R.R. or street: <b>Matthew</b> City, state, zip code: <b>Oak Hill Kans 67472</b>			
4. Locate with "X" in section below:			Sketch map:		6. Bore hole dia. <b>11</b> in. Completion date <b>12-16-71</b> Well depth <b>66</b> 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	
5. Type and color of material			From	To	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<b>Top Soil, Black</b>			<b>1</b>	<b>5</b>	9. Casing: Material <b>PVC</b> Height: <b>0</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>238 lb wall</b> Dia. <b>5</b> in. to <b>66</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <input type="checkbox"/>	
<b>Clay Sandy yellow</b>			<b>5</b>	<b>28</b>	10. Screen: Manufacturer's name <b>M.P.I.</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>040</b> Length <b>40</b> Set between <b>26</b> ft. and <b>66</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4 X 1/2</b>	
<b>Rock, hard blue</b>			<b>28</b>	<b>35</b>	11. Static water level: <b>28</b> ft. below land surface Date <b>12-16-77</b> no./day/yr.	
<b>Shale, Blue</b>			<b>35</b>	<b>66</b>	12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>25</b> g.p.m.	
					13. Water sample submitted: ____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date	
					14. Well head completion: <b>NA</b> <input type="checkbox"/> Pitless adapter ____ Inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> <b>1-2</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>06</b> ft. to <b>06</b> ft.	
					16. Nearest source of possible contamination: ft. <b>500</b> Direction <b>SOUTH</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	
					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>Strader Drilling Co. 237</b> Business name _____ License No. _____ Address <b>Blue Rapids</b> Signed <b>Harold Strader</b> Date <b>12-16-77</b> Authorized representative	
18. Elevation:			19. Remarks:			
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

9-1-0-33 NW 1/4 SE SW  
 Sec 33  
 NW 1/4 SE SW