

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

ada ok

1. Location of well:	County Jackson	Fraction NE 1/4 SE 1/4 NE 1/4	Section number 36	Township number T 9 S R 15	Range number 15				
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: Brannon, Clyde R.R. or street: City, state, zip code:						
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date <u>4/1/76</u> Well depth <u>65</u> ft.					
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">7. <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug</td> <td style="width:50%;"></td> </tr> <tr> <td><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary</td> <td></td> </tr> </table>		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	
				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	9. Casing: Material <u>PVC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>30</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>200</u> lbs./ft. Dia. <u>5</u> in. to <u>65</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>65</u> ft. depth gage No. <u>258 MNC</u>					
Top Soil		0	1	10. Screen: Manufacturer's name <u>Modern</u> Type <u>PVC</u> Dia. <u>5 inch</u> Slot/gauze _____ Length <u>20 feet</u> Set between <u>45</u> ft. and <u>65</u> ft. _____ ft. and _____ ft. Gravel pack? <u>Yes</u> Size range of material <u>1/2"</u>					
Yellow Clay		16	3	11. Static water level: _____ mg./day/yr. <u>27</u> ft. below land surface Date <u>4/1/76</u>					
Yellow Clay with Sand		3	17	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>1-1/2</u> g.p.m.					
Yellow Clay with coarse Lime Rock		17	27	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____					
Quick Sand		27	51	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade					
Gray Gravel and Sand		51	58	15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>10</u> ft.					
Blue Shale		58	60	16. Nearest source of possible contamination: ft. <u>80</u> Direction <u>South</u> type <u>Barn</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Blue Lime Rock		60	64	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					
Blue Shale		64	65	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>Cummins Drilling Co 148</u> Business name _____ License No. _____ Address <u>Box 109</u> Signed <u>Frank Cummins</u> Date <u>4/2/76</u> Authorized representative					
18. Elevation: <u>1182 HOS</u> Topography: <input checked="" type="checkbox"/> Hill <u>1115 90</u> <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks:							

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

Form WWC-5

T 9 S R 15
 NE 1/4 SE 1/4 NE 1/4
 Sec 36

1124