

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 <i>Sheridan</i>	Fraction <i>NW 1/4 SW 1/4 NW 1/4</i>	Section number <i>5</i>	Township number <i>T 10 S</i>	Range number <i>R 30 E</i>
2. Distance and direction from nearest town or city: <i>1 N 1/2 W of Angler</i>			3. Owner of well: <i>John W. Ostmeyer</i>			
Street address of well location if in city: <i>71N 1/2 W 1st Angler</i>			R.R. or street: City, state, zip code:			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <i>9</i> in. Completion date <i>12-20</i> Well depth <i>173</i> 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 _____ Height: Above or below Threaded _____ Welded _____ Surface <i>12</i> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <i>200psi</i> lbs./ft. Dia. <i>0</i> in. to <i>173</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <i>250</i>		
5. Type and color of material		From	To	10. Screen: Manufacturer's name <i>Get Screen</i> Type <i>PVC</i> Dia. <i>5</i> Slot/gauze <i>3/16</i> Length <i>8</i> Set between <i>165</i> ft. and <i>173</i> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>3/16</i>		
<i>Top soil</i>		<i>0</i>	<i>36</i>	11. Static water level: _____ mo./day/yr. <i>109</i> ft. below land surface Date <i>12-20</i>		
<i>Sandy clay</i>		<i>36</i>	<i>81</i>	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>30</i> g.p.m.		
<i>F sand M. gravel</i>		<i>81</i>	<i>88</i>	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
<i>S. clay</i>		<i>88</i>	<i>95</i>	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <i>12</i> inches above grade		
<i>M. Gravel</i>		<i>95</i>	<i>110</i>	15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete Depth: From <i>4</i> ft. to <i>14</i> ft.		
<i>F sand</i>		<i>110</i>	<i>119</i>	16. Nearest source of possible contamination: ft. <i>300</i> Direction <i>nw</i> Type <i>land</i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No		
<i>Sandy clay</i>		<i>119</i>	<i>129</i>	17. Pump: _____ Not installed Manufacturer's name <i>Hauko</i> Model number <i>13EM</i> HP <i>1</i> Volts <i>230</i> Length of drop pipe <i>147</i> ft. capacity <i>15</i> g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other		
<i>F sand S. clay</i>		<i>129</i>	<i>135</i>	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. <i>B+B Drilling</i> <i>326</i> Business name _____ License No. _____ Address <i>Turner Ks</i> Signed <i>Joseph Beckman</i> Date <i>1-12</i> Authorized representative		
<i>S clay</i>		<i>135</i>	<i>142</i>			
<i>F sand</i>		<i>142</i>	<i>150</i>			
<i>sand stone hard</i>		<i>150</i>	<i>151</i>			
<i>F sand M. gravel</i>		<i>151</i>	<i>160</i>			
<i>sand stone hard</i>		<i>160</i>	<i>161</i>			
<i>M. Gravel</i>		<i>161</i>	<i>166</i>			
<i>Sandy clay</i>		<i>166</i>	<i>170</i>			
<i>Other</i> (Use a second sheet if needed)		<i>170</i>	<i>173</i>			
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5

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