

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 ELLIS	Fraction SW 1/4 SE 1/4 NW 1/4	Section number 14	Township number T 11 S R 17 E AD	Range number
2. Distance and direction from nearest town or city: 14 miles N 8 E			3. Owner of well: Beech Ranch		
Street address of well location if in city: HAYS, KS.			R.R. or street: 2101 Lincoln		
Locate with "X" in section below:			City, state, zip code: HAYS, KS.		
<p>Sketch map:</p>		<p>6. Bore hole dia. 9 in. Completion date 2/1/77</p> <p>Well depth 33 ft.</p> <p>7. <input checked="" 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</p> <p>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</p> <p>9. Casing: Material <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> galvanized <input type="checkbox"/> Surface 16 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 33 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 160</p> <p><input checked="" type="checkbox"/> Screen Manufacturer's name Jet Stream Type _____ Dia. 5 Slot gauge _____ Length 10 Set between 23 ft. and 33 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material 1/4-1/8</p>			
5. Type and color of material		From	To		
Top soil		0	4		
Fine sand		4	30		
Shale		30	33		
				11. Static water level: _____ mp./day/yr. 25 ft. below land surface Date 2/1/77	
				12. Pumping level below land surfaces: 27 ft. after 1 hrs. pumping 10 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From TOP ft. to 10 ft.	
				16. Nearest source of possible contamination: none ft. _____ Direction _____ Type _____ 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:	
<p>Topography:</p> <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				<p>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.</p> <p>KART WATER WELL DRUGS Business name _____ License No. 1598 Address Highway 40 Signed D.B. Kart Date 2-1-77 Authorized representative</p>	

T 11
 R 17
 E AD
 Sec 14
 SW 1/4 SE 1/4 NW 1/4

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

Form WWC-5