

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>Ottawa</u> | Fraction: <u>SW 1/4 SW 1/4 SE 1/4</u> | Section number: <u>17</u> | Township number: <u>T 11 S</u> | Range number: <u>R 2 W</u> |
| 2. Distance and direction from nearest town or city: <u>4 mi. N. + 1.5 E</u> | | | 3. Owner of well: <u>Cloyd Jones</u> | | |
| Street address of well location if in city: <u>of Bennington, Ks</u> | | | R.R. or street: <u>Twin Valley Oil Co</u> | | |
| | | | City, state, zip code: <u>Bennington, Kans 67422</u> | | |
| 4. Locate with "X" in section below: | | | Sketch map: | | |
| <p style="text-align: center;">N NW NE SW SE S W E 1 Mile</p> | | | <p style="text-align: center;">1 Mile</p> <p style="text-align: center;"><u>14 ft. below surface</u></p> | | |
| 5. Type and color of material | | | From | To | 6. Bore hole dia. <u>6</u> in. Completion date <u>5-24-77</u> |
| <u>Colluvium</u> | | | | | Well depth <u>30</u> ft. |
| <u>Clay, sandy, tan</u> | | | <u>0</u> | <u>4</u> | 7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug |
| <u>Krieger fm:</u> | | | | | <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary |
| <u>Sandstone, fine to medium</u> | | | <u>4</u> | <u>29</u> | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry |
| <u>Shale, dark & light gray</u> | | | <u>29</u> | <u>80</u> | <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 <input type="checkbox"/> Height <u>Above</u> or below |
| | | | | | Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. |
| | | | | | RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. |
| | | | | | Dia. <u>4</u> in. to <u>30</u> ft. depth Wall Thickness: inches or |
| | | | | | Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>S. 90</u> |
| | | | | | 10. Screen: Manufacturer's name <u>Shop</u> |
| | | | | | Type <u>slots</u> Dia. <u>4"</u> |
| | | | | | Slot/gauze <u>1/16"</u> Length <u>3'</u> |
| | | | | | Set between <u>27</u> ft. and <u>30</u> ft. |
| | | | | | <input type="checkbox"/> ft. and <input type="checkbox"/> ft. |
| | | | | | Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/10"</u> |
| | | | | | 11. Static water level: <u>14</u> ft. below land surface Date <u>5-24-77</u> |
| | | | | | mo./day/yr. <u>5-24-77</u> |
| | | | | | 12. Pumping level below land surfaces: |
| | | | | | <u>28</u> ft. after <u>1</u> hrs. pumping <u>2</u> g.p.m. |
| | | | | | <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. |
| | | | | | Estimated maximum yield <u>2</u> g.p.m. |
| | | | | | 13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr. |
| | | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade |
| | | | | | 15. Well grouted? <input checked="" type="checkbox"/> Yes |
| | | | | | With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete |
| | | | | | Depth: From <u>3</u> ft. to <u>13</u> ft. |
| | | | | | 16. Nearest source of possible contamination: <u>NO</u> |
| | | | | | ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> |
| | | | | | Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | | | 17. Pump: <input checked="" type="checkbox"/> Not installed |
| | | | | | Manufacturer's name <input type="checkbox"/> |
| | | | | | Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> |
| | | | | | Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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) | | | | | 20. Water well contractor's certification: |
| 18. Elevation: <u>1300</u> | | | This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. | | |
| 19. Remarks: | | | <u>Mechanic Drilling Co 126</u> | | |
| Topography: | | | Business name <u>Salvia Dr</u> License No. <input type="checkbox"/> | | |
| <input type="checkbox"/> Hill | | | Address <u>Salvia Dr</u> | | |
| <input checked="" type="checkbox"/> Slope | | | Signed <u>O.J. Fent</u> Date <u>7-11-77</u> | | |
| <input type="checkbox"/> Upland | | | Authorized representative | | |
| <input type="checkbox"/> Valley | | | | | |

T 11 S R 2 W

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

Form WWC-5