

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 Gove | Fraction NW 1/4 SW 1/4 SW 1/4 | Section number 7 | Township number T 11 | Range number S R 26 |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: | | | 3. Owner of well: George Custer R.R. or street: City, state, zip code: Quinter, Ks. 67752 | | | |
| 4. Locate with "X" in section below: | | Sketch map: | | | 6. Bore hole dia. 19 in. Completion date _____ Well depth 170 ft. 6/2/75 | |
| | | | | | 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 checked="" 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 checked="" 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 | | |
| silt + clay | | 0 | 45 | 9. Casing: Material steel Height: above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP 3 PVC _____ Weight _____ lbs./ft. Dia. 12 3/4 in. to 170 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____ | | |
| sandstone + clay | | 45 | 80 | 10. Screen: Manufacturer's name _____ W.A. Brown Type steel Dia. 12 3/4 in. Slot/gauze <input checked="" type="checkbox"/> Length 20 ft. Set between 130 ft. and 170 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/2 down | | |
| sand + gravel with Rock | | 80 | 120 | 11. Static water level: _____ mo./day/yr. 83 ft. below land surface Date 6/2/75 | | |
| sand + gravel with clay streaks | | 120 | 168 | 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 650 g.p.m. | | |
| yellow clay (Oshre) | | 168 | 170 | 13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____ | | |
| | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade | | |
| | | | | 15. Well grouted? <input checked="" type="checkbox"/> yes cement slab With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft. | | |
| | | | | 16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input 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: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Aqua Well Drilling 231 Business name _____ License No. _____ Address Gove, Ks. 67736 Signed J.M. Juttie Date 6-20-77 Authorized representative | | |
| 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

Farm WWC-5