

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 <b>Gove</b>	Fraction <b>SW 1/4 SW 1/4 NE 1/4</b>	Section number <b>36</b>	Township number <b>T 11 S R</b>	Range number <b>28</b>	<b>DRL</b> <b>EAW</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:		<b>3 1/2 S - 1/2 W of Park</b>		3. Owner of well: <b>Pius Phlieger</b> R.R. or street: <b>Park, Ks. 67751</b> City, state, zip code:		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>19</u> in. Completion date <u>8/30/76</u> Well depth <u>54</u> ft.		
				7. <input 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 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		
				9. Casing: Material <u>CeAs</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>12</u> in. to <u>54</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>2</u> in.		
				10. Screen: Manufacturer's name <u>Johnson Well Casing</u> Type <u>cement asbestos</u> Dia. <u>12</u> in. Slot/gauze _____ Length <u>20</u> ft. Set between <u>34</u> ft. and <u>54</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/2</u> down		
				11. Static water level: _____ mo./day/yr. <u>33</u> ft. below land surface Date <u>8/30/76</u>		
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>100</u> g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade		
				<input checked="" type="checkbox"/> Well grouted? <input checked="" type="checkbox"/> <u>cement slab</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>5</u> ft.		
				<input checked="" type="checkbox"/> Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes _____ 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. <u>Aqua Well Drilling</u> <u>281</u> Business name <u>Gove, Ks. 67736</u> License No. Address _____ Signed <u>J M Intelle</u> Date <u>6-20-77</u> 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

Form WWC-3