

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>RUSSELL</b>	Section <b>SW 1/4 1/4 1/4</b>	Section number <b>35</b>	Township number <b>T 12 S R 15 E/W</b>	Range number
Distance and direction from nearest town or city: <b>RUSSELL</b>			3. Owner of well: <b>HENRY A. BENDER</b>			
Street address of well location if in city: <b>N/W 12 MILES</b>			R.R. or street: <b>STAR ROUTE</b>			
Locate with "X" in section below:			City, state, zip code: <b>RUSSELL, KANSAS 67665</b>			
Sketch map: 			6. Hole dia. <b>7</b> in. Completion date <b>3-14-77</b> Well depth <b>50</b> ft.			
			7. <input checked="" 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 type="checkbox"/> Reverse rotary			
			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other			
			9. Casing: Material <b>PVC</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> _____ in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>282.8</b> lbs./ft. <b>100</b> Dia. <b>5</b> in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>265</b>			
5. Type and color of material			From	To	10. Screens: Manufacturer's name	
TOP SOIL			0	6	<b>MODERN PIPE INC</b>	
BROWN CLAY			6	18	Type <b>PVC# 200</b> Dia. <b>5"</b>	
BLUE SHALE			18	46	Slot/gauze <b>1/16</b> Length <b>X</b>	
SAND ROCK			46	48	Set between <b>40</b> ft. and <b>50</b> ft.	
BLUE SHALE			48	50	Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4-1/8</b>	
					11. Static water level: _____ mo./day/yr.	
					_____ ft. below land surface Date _____	
					12. Pumping level below land surfaces: <b>bailer test</b>	
					_____ ft. after _____ hrs. pumping _____ g.p.m.	
					_____ ft. after _____ hrs. pumping _____ g.p.m.	
					Estimated maximum yield <b>3</b> 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 checked="" type="checkbox"/> Pitless adapter <b>18"</b> inches above grade	
					15. Well grouted? <b>yes</b>	
					With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete	
					Depth: From <b>0</b> ft. to <b>36</b> ft.	
					16. Nearest source of possible contamination:	
					ft. _____ Direction _____ Type _____	
					Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: _____ Not installed	
					Manufacturer's name <b>AERMOTOR</b>	
					Model number <b>3D-5-33</b> HP <b>1/3</b> Volts <b>110</b>	
					Length of drop pipe _____ ft. capacity <b>3</b> g.p.m.	
					Type:	
					<input checked="" 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:			
Topography:			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.			
<input type="checkbox"/> Hill			<b>SMALL'S WATER WELL DRLG. 260</b>			
<input type="checkbox"/> Slope			Business name _____ License No. _____			
<input type="checkbox"/> Upland			Address _____			
<input checked="" type="checkbox"/> Valley			Signed <b>Edwin Small</b> Date <b>1977</b>			
			Authorized representative			

T 12 S R 15 E  
 Sec 35 SW 1/4 1/4 1/4

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

Form WWC-5