

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>Ellis</u> | Fraction <u>SC 1/4SE 1/4SE 1/4</u> | Section number <u>32</u>  | Township number <u>T 12</u> | Range number <u>S R 20</u> | <u>EW</u>  |  |  |
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city: <u>1-1/2 mile W from Ellis, Kans.</u>   |                     |                                    | 3. Owner of well: <u>C.J. Vanhorn</u><br>R.R. or street: <u>RFD 3 67637</u><br>City, state, zip code: <u>Ellis, Kans.</u>   |                             |                            |  |  |  |
| 4. Locate with "X" in section below:<br>N<br>W<br>E<br>S<br>1 Mile  |                     |                                    | Sketch map:<br>   |                             |                            | 6. Bore hole dia. <u>10</u> in. Completion date <u>4-11-77</u><br>Well depth <u>52</u> ft.   |  |  |
| 5. Type and color of material   |                     |                                    | 7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary  |                             |                            | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other         |  |  |
|   |                     |                                    | 9. Casing: Material <u>Plts</u> Height: Above or below <u>below</u><br>Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>60</u> in.<br>RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft.<br>Dia. <u>6</u> in. to <u>30</u> ft. depth Wall Thickness: inches or _____<br>Dia. _____ in. to _____ ft. depth gage No. <u>025-2m</u> |                             |                            | 10. Screen: Manufacturer's name <u>Jett &amp; Lowell</u><br>Type <u>Plts</u> Dia. <u>5</u><br>Slot/gauze _____ Length <u>20</u><br>Set between <u>30</u> ft. and <u>50</u> ft.<br>_____ ft. and _____ ft.<br>Gravel pack? <u>yes</u> Size range of material <u>1/2 - 1/4</u>   |  |  |
|   |                     |                                    | 11. Static water level: _____ mo./day/yr.<br><u>20</u> ft. below land surface Date <u>4-11-77</u>   |                             |                            | 12. Pumping level below land surfaces:<br><u>22</u> ft. after <u>1</u> hrs. pumping <u>8</u> g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield <u>14</u> g.p.m.   |  |  |
|   |                     |                                    | 13. Water sample submitted: _____ mo./day/yr.<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____   |                             |                            | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter _____ inches above grade   |  |  |
|   |                     |                                    | 15. Well grouted? <u>yes</u><br>With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <u>6</u> ft. to <u>17</u> ft.   |                             |                            | 16. Nearest source of possible contamination:<br>ft. <u>150</u> Direction <u>NE</u> Type <u>lava</u><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |  |  |
|   |                     |                                    | 17. Pump: _____ Not installed<br>Manufacturer's name _____<br>Model number _____ HP <u>1</u> Volts _____<br>Length of drop pipe _____ ft. capacity _____ g.p.m.<br>Type:<br><input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other      |                             |                            | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>276</u><br><u>Luce Water Well Drilling 274</u><br>Business name _____ License No. _____<br>Address <u>503 Moursel</u><br>Signed <u>John Luce</u> Date <u>4-15-77</u><br>Authorized representative |  |  |
| 18. Elevation:<br>Topography:<br><input type="checkbox"/> Hill<br><input checked="" type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley |                     |                                    | 19. Remarks:<br><u>This well has a pit over it 24" above ground</u>   |                             |                            |  |  |  |

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

Form WWC-5