


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 10 | Township number T 12 S | Range number R 26 E | DRL EW | | | | | | | | | | | | | | | |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: | | | | 3. Owner of well: Wm. Jamison R.R. or street: City, state, zip code: Quinter, Ks. 67752 | | | | | | | | | | | | | | | | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile | | | Sketch map:  | | 6. Bore hole dia. 8 in. Completion date _____ Well depth 47 ft. 1/5/76/76 | | | | | | | | | | | | | | | | | |
| 5. Type and color of material | | | From To | | 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 type="checkbox"/> Reverse rotary | | | | | | | | | | | | | | | | | |
| | | | | | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <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 | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Big Creek alluvium</td> <td style="width: 5%;">From</td> <td style="width: 5%;">To</td> <td colspan="2" rowspan="5"> 9. Casing: Material ptls Height: above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 47 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____ 10. Screen: Manufacturer's name _____ Pearless Plastics Type PVC Dia. 5 in. Slot/gauze 40 Length 20 ft. Set between 37 ft. and 47 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 down 11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date 1/5/76 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m. 13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____ 14. Well head completion: _____ Pitless adapter _____ Inches above grade 15. Well grouted? <input checked="" type="checkbox"/> With: clay heat cement _____ Bentonite _____ Concrete _____ Depth: From 0 ft. to 20 ft. 16. 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) </td> </tr> <tr> <td>Silt + clay</td> <td>0</td> <td>20</td> </tr> <tr> <td>Blue Mud</td> <td>20</td> <td>40</td> </tr> <tr> <td>sand</td> <td>40</td> <td>47</td> </tr> <tr> <td>shale</td> <td>47</td> <td></td> </tr> </table> | | | Big Creek alluvium | From | To | 9. Casing: Material ptls Height: above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 47 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____ 10. Screen: Manufacturer's name _____ Pearless Plastics Type PVC Dia. 5 in. Slot/gauze 40 Length 20 ft. Set between 37 ft. and 47 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 down 11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date 1/5/76 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m. 13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____ 14. Well head completion: _____ Pitless adapter _____ Inches above grade 15. Well grouted? <input checked="" type="checkbox"/> With: clay heat cement _____ Bentonite _____ Concrete _____ Depth: From 0 ft. to 20 ft. 16. 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) | | Silt + clay | 0 | 20 | Blue Mud | 20 | 40 | sand | 40 | 47 | shale | 47 | | 10. 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 281 Business name _____ License No. _____ Address Gove, Ks. 67736 Signed M. Suttle Date 6-20-77 Authorized representative | | |
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| | | | sand | 40 | 47 | | | | | | | | | | | | | | | | | |
| shale | 47 | | | | | | | | | | | | | | | | | | | | | |
| 18. Elevation: | | 19. Remarks: | | 20. Water well contractor's certification: | | | | | | | | | | | | | | | | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | | | | | | | | | | | | | | | | | | | | | | |

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

Form WWC-5