

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 SW 1/4 SE 1/4 NE 1/4	Section number 15	Township number T 12 S	Range number R 27	DR EW
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:			
2. Distance and direction from nearest town or city: 5 south 1 west of Quinter			3. Owner of well: Arlen Polifka R.R. or street: RR 1 Box 68 City, state, zip code: Quinter, Ks. 67752			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date <u>1/3/78</u> Well depth <u>38</u> ft.		
N 				7. <input checked="" 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		
5. Type and color of material		From	To	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		
clay and silt		0	30	9. Casing: Material _____ Height: <u>Above</u> or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>38</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>250</u>		
gravel		30	38	10. Screen: Manufacturer's name <u>Peerless Plastics</u> Type <u>PVC</u> Dia. <u>5 in.</u> Slot/gauze <u>1/16</u> Length <u>10 ft.</u> Set between <u>28</u> ft. and <u>38</u> ft. _____ ft. and _____ ft.		
shale		38		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/2</u> down		
				11. Static water level: <u>18</u> mo./day/yr. _____ ft. below land surface Date <u>1/3/78</u>		
				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 checked="" type="checkbox"/> No _____ Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <u>clay</u> cement _____ Bentonite _____ Concrete _____ Depth: From <u>0</u> ft. to <u>5</u> 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)				
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 281</u> Business name _____ License No. _____ Address <u>Gove, Ks. 67736</u> Signed <u>M. Suttle</u> Date <u>2-78</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-5