

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>NW 1/4 NW 1/4 NE 1/4</b>	Section number <b>26</b>	Township number <b>T 12 S R 29</b>	Range number <b>29</b>	<b>DRW</b> <b>EW</b>
2. Distance and direction from nearest town or city: <b>1 W - 1 1/2 N of Gove</b>			3. Owner of well: <b>Dora Bland</b>			
Street address of well location if in city:			R.R. or street: <b>Rt. 1</b>			
			City, state, zip code: <b>Gove, Kansas 67736</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8</b> in. Completion date _____ Well depth <b>60</b> ft. <b>9-15-76</b>		
				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		
				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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
5. Type and color of material		From		To		9. Casing: Material <b>pits</b> Height: <b>60</b> or below Threaded _____ Welded <b>91</b> Surface <b>18</b> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. <b>60</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____
						10. Screen: Manufacturer's name <b>Peerless</b> <b>Plastic Pipe</b> Type <b>PVC</b> Dia. <b>5 in</b> Slot/gauze _____ Length <b>20 ft</b> Set between <b>40</b> ft. and <b>60</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> <b>YES</b> Size range of material <b>1/4 down</b>
						11. Static water level: _____ mo./day/yr. <b>40</b> ft. below land surface Date <b>9-15-76</b>
						12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ <b>10</b> g.p.m.
						13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> 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: <b>clay</b> cement _____ Bentonite _____ Concrete _____ Depth: From <b>0</b> ft. to <b>20</b> ft.
						16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> 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:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						
		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. <b>Aqua Well Drilling</b> <b>281</b> Business name License No. Address <b>Gove, Kansas 67736</b> Signed <b>M. Tuttle</b> Date <b>6-20-77</b> Authorized representative				

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

Form WWC-5