

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 820-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County Lincoln	Fraction NW 1/4 NW 1/4 NW 1/4	Section number 36	Township number T 12	Range number S R 6W	E/W
2. Distance and direction from nearest town or city: 1 mi E + 4 N of Juniata			3. Owner of well: Lorenz Suelter			
Street address of well location if in city:			R.R. or street: RR 1			
			City, state, zip code: Beverly Kans 67423			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>6</u> in. Completion date _____		
				Well depth <u>465</u> ft. 5/22/79		
				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		
				9. Casing: Material _____ Height: <u>Above</u> or below Threaded _____ Welded _____ Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>4</u> in. to <u>465</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>200</u>		
5. Type and color of material				10. Screen: Manufacturer's name <u>Sharp</u>		
				Type <u>slots</u> Dia. <u>4"</u>		
				Slot/gauze <u>1/16"</u> Length <u>3'</u>		
				Set between <u>43.5</u> ft. and <u>46.5</u> ft.		
				_____ ft. and _____ ft.		
				Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/10"</u>		
				11. Static water level: _____ mo./day/yr. <u>11</u> ft. below land surface Date 5/22/79		
				12. Pumping level below land surfaces: <u>ND</u> ft. after <u>1/2</u> hrs. pumping <u>20</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>50</u> g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> <u>Y</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.		
				16. Nearest source of possible contamination: ft. <u>ND</u> Direction _____ Type _____ Well disinfected upon completion? <input checked="" 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:		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.		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				Hydraulic Drilling <u>126</u> Business name _____ License No. _____ Address <u>Juniata, Kans</u> Signed <u>Ol Fert</u> Date <u>6/14/79</u> Authorized representative		

T 12 - 6W 36 NW 1/4 NW 1/4

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

Form WWC-5