

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 Ellis	Fraction SW 1/4 NW 1/4 NE 1/4	Section number 28	Township number T 13 S R 18 E	Range number																					
2. Distance and direction from nearest town or city: Street address of well location if in city: 2925 Hillcrest				3. Owner of well: Virgil Weigel R.R. or street: 2925 Hillcrest City, state, zip code: Hays KS.																							
4. Locate with "X" in section below: 		Sketch map:		6. Bore hole dia. 9 in. Completion date 3-27-78 Well depth 67 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 <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary																							
Yellow fill dirt Top soil sub soil brown clay fine to med sand blue shale		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr><td></td><td>0</td><td>5</td></tr> <tr><td></td><td>5</td><td>9</td></tr> <tr><td></td><td>9</td><td>20</td></tr> <tr><td></td><td>20</td><td>55</td></tr> <tr><td></td><td>55</td><td>64</td></tr> <tr><td></td><td>64</td><td>67</td></tr> </tbody> </table>			From	To		0	5		5	9		9	20		20	55		55	64		64	67	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 type="checkbox"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
	From	To																									
	0	5																									
	5	9																									
	9	20																									
	20	55																									
	55	64																									
	64	67																									
				9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 67 ft. depth Wall Thickness: inches Dia. _____ in. to _____ ft. depth gage No. 258																							
				10. Screen: Manufacturer's name Jet Stream Type PVC Dia. 5" <input checked="" type="checkbox"/> gauze Length 10' Set between 56 ft. and 66 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 x 1/2																							
				11. Static water level: _____ mo./day/yr. 50 ft. below land surface Date 3-27-78																							
				12. Pumping level below land surfaces: 50 ft. after 1 hrs. pumping 10 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 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 24 inches above grade																							
				<input checked="" type="checkbox"/> Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.																							
				<input checked="" type="checkbox"/> Nearest source of possible contamination: None ft. _____ 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																							
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. East Water Well 1994 Business name _____ License No. _____ Address E Highway 48 Hays KS Signed M D East Date 3-27-78 Authorized representative																							

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

Form WWC-5

T 13 S R 18 E Sec 28 SW 1/4 NE 1/4