

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 <u>Saline</u>		Fraction <u>SE 1/4 SE 1/4 NW 1/4</u>		Section number <u>35</u>		Township number <u>T 13 S</u>		Range number <u>R 2W E/W</u>			
2. Distance and direction from nearest town or city: <u>west side</u>				3. Owner of well: <u>A.R. Seagrave</u>							
Street address of well location if in city: <u>New Cambridge, Kans</u>				R.R. or street: _____							
				City, state, zip code: <u>New Cambridge, Kans 67470</u>							
4. Locate with "X" in section below:				Sketch map:				6. Bore hole dia. <u>4</u> in. Completion date _____			
								Well depth <u>505</u> ft. <u>4-7-77</u>			
								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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other				9. Casing: Material _____ Height: <u>(Above or below)</u>			
				Threaded _____ Welded _____ Surface <u>12</u> in.				RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft.			
				Dia. <u>4</u> in. to <u>505</u> ft. depth				Wall Thickness: inches or _____			
				Dia. _____ in. to _____ ft. depth				gauge No. <u>5490</u>			
5. Type and color of material				From		To		10. Screen: Manufacturer's name <u>Sheep</u>			
<u>Alluvium</u>								Type <u>slots</u> Dia. <u>4"</u>			
<u>Clay, silty, light brown</u>				<u>0</u>		<u>26</u>		Slot/gauze <u>3/32"</u> Length <u>3'</u>			
<u>Sand, fine to coarse</u>				<u>26</u>		<u>27</u>		Set between <u>475</u> ft. and <u>505</u> ft.			
<u>Silt & clay, gray</u>				<u>27</u>		<u>35</u>		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/8</u>			
<u>Gravel, fine to medium & sand</u>				<u>35</u>		<u>44</u>		11. Static water level: _____ mo./day/yr.			
<u>Gravel, coarse & sand</u>				<u>44</u>		<u>505</u>		<u>22</u> ft. below land surface Date <u>4-7-77</u>			
								12. Pumping level below land surfaces:			
								<u>32</u> ft. after <u>42</u> hrs. pumping <u>30</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 checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
								14. Well head completion:			
								_____ Pitless adapter <u>12</u> inches above grade			
								15. Well grouted? <input checked="" type="checkbox"/>			
								With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete			
								Depth: From <u>0</u> ft. to <u>10</u> ft.			
								16. Nearest source of possible contamination:			
								ft. <u>85</u> Direction <u>N</u> Type <u>septic tank</u>			
								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:									
Topography:											
<input type="checkbox"/> Hill											
<input type="checkbox"/> Slope											
<input type="checkbox"/> Upland											
<input checked="" 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.									
		<u>Hydramatic Drilling Co 126</u>									
		Business name _____ License No. _____									
		Address <u>Saline, Kans</u>									
		Signed <u>Old Faust</u> Date <u>5-27-77</u>									
		Authorized representative									

T 13 S R 2W E/W SE SE NW 1/4 1/4 1/4

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

Form WWC-5