

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

WATER WELL RECORD
KSA 82a-1201-1215

AAA

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

1. Location of well: County rego		Fraction NE 1/4 NE 1/4 NE 1/4		Section number 22		Township number T 13 S		Range number R 22 E 0	
2. Distance and direction from nearest town or city: 5 miles south +				3. Owner of well: John Laughlin					
Street address of well location if in city: 1/4 mile west of Ogallah, Kan.				R.R. or street: R.R.					
4. Locate with "X" in section below:				Sketch map:		6. Hole dia. 10 in. Completion date _____			
				<p>Well depth 42 ft. 5-1-79</p>		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				9. Casing: Material plte Height: Above or below					
<input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock				Threaded _____ Welded plte Surface 10 in.					
<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other				RMP _____ PVC plte Weight _____ lbs./ft.					
5. Type and color of material				From		Dia. 5 in. to 22 ft. depth Wall Thickness: inches or			
				To		Dia. _____ in. to _____ ft. depth Gage No 4in			
Top soil				0		10. Screen: Manufacturer's name Geo Lammell			
Light B. clay w/ Brown Heavy clay				10		Type Plts Dia. 5			
F. Gray Sand w/ coarse S sand & U. gravel				22		Slot/gauze _____ Length 40ft			
Dark Blue shale				40		Set between 22 ft. and 42 ft.			
BROCK 40'				40		Gravel pack? <input checked="" type="checkbox"/> Size range of material 8-7/8			
18' sal thick				22		11. Static water level: _____ mo./day/yr.			
40				42		22 ft. below land surface Date 5-1-79			
22				40		12. Pumping level below land surfaces:			
18' sal thick				22		_____ ft. after _____ hrs. pumping _____ g.p.m.			
22				40		_____ ft. after _____ hrs. pumping _____ g.p.m.			
22				40		Estimated maximum yield 2000 g.p.m.			
22				40		13. Water sample submitted: _____ mo./day/yr.			
22				40		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
18' sal thick				22		14. Well head completion:			
40				42		_____ Pitless adapter _____ Inches above grade			
18' sal thick				22		15. Well grouted? <input checked="" type="checkbox"/>			
40				42		With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete			
18' sal thick				22		Depth: From 5 ft. to 15 ft.			
40				42		16. Nearest source of possible contamination:			
18' sal thick				22		ft 150 Direction n.w. Type gravel			
40				42		Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No			
22				40		17. Pump: _____ Not installed			
22				40		Manufacturer's name _____			
22				40		Model number _____ HP _____ Volts _____			
22				40		Length of drop pipe _____ ft. capacity _____ g.p.m.			
22				40		Type:			
22				40		<input type="checkbox"/> Submersible <input type="checkbox"/> Turbine			
22				40		<input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating			
22				40		<input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
18. Elevation:				20. Water well contractor's certification:					
Topography:				This well was drilled under my jurisdiction and this report					
<input type="checkbox"/> Hill				is true to the best of my knowledge and belief.					
<input type="checkbox"/> Slope				Luce Water Well 276					
<input checked="" type="checkbox"/> Upland				Business name _____ License No. _____					
<input type="checkbox"/> Valley				Address 503 maple					
2254 1000				Signed John Luce Date 5-1-79					
				Authorized representative					

T 13
 R 22
 E 0
 Sec 22
 NE NE NE
 1/4 1/4 1/4

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

Form WWC-5