

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 Saline	Fraction SE 1/4 SW 1/4 NW 1/4	Section number 14	Township number T 13 S	Range number R 3W E/W
2. Distance and direction from nearest town or city: Street address of well location if in city: 2.5 Mi. N. Salina			3. Owner of well: Wendell Mickell R.R. or street: 2118 Edgehill Rd City, state, zip code: Salina Kans 67401			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 2 1/2 in. Completion date _____ Well depth 29 ft. 4-22-78		
				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		
5. Type and color of material		From	To	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		
CDLUVIUM: Clay + silt, sandy, coarse ss. rubble Heavy fms Sandstone, medium to fine, yellow + brown; contains interbedded shale, gray Sandstone, medium, yellow Sandstone, hard, calcareous, light gray Shale, gray				9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 10 in. to 29 ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth Gage No. 5/8"		
				10. Screen: Manufacturer's name Shop Type slots Dia. 10" Slot/gauze 3/32 Length 3' Set between 14 ft. and 17 ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/8"		
				11. Static water level: _____ mo./day/yr. 6.5 ft. below land surface Date 4-19-78		
				12. Pumping level below land surfaces: 12.2 ft. after 1 hrs. pumping 11 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 11 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 12 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 3 ft. to 10 ft.		
				16. Nearest source of possible contamination: ft. Open field Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ 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:		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		For use during construction Permanent supply is to be Rural Water Dist. connection when available		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Raymond B. Dooling License No. 126 Business name _____ Address Salina Kans Signed Colbert Date 5-2-78 Authorized representative		

T 13
 R 3W
 Sec 14
 SE 1/4 SW 1/4 NW 1/4

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

Form WWC-5