

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 NE 1/4 SW 1/4 NE 1/4	Section number 33	Township number T 13 S	Range number R 4W E/W
2. Distance and direction from nearest town or city: 1 mi N. Hechville			3. Owner of well: Harry Hughes			
Street address of well location if in city:			R.R. or street: 763 Vassar Dr.			
			City, state, zip code: Salina Ks 67401			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 6 in. Completion date _____		
				Well depth 27 ft. 7-28-77		
				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		
Colluvium:				9. Casing: Material _____ Height Above or below Threaded _____ Welded _____ Surface 24 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 4 in. to 27 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 5.40		
Silt, sandy gray + rubble		0	1	10. Screen: Manufacturer's name Shap Type slots Dia. 4" Slot/gauze 1/16" Length 3' Set between 24 ft. and 27 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/10"		
Kiowa fm:				11. Static water level: _____ mo./day/yr. 22 ft. below land surface Date 7-28-77		
Sandstone, medium, brown + yellow		1	265	12. Pumping level below land surfaces: 24 ft. after 1 hrs. pumping 2.5 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 4 g.p.m.		
Shale, soft, yellow		265	28	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter 24 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 0 ft. to 10 ft.		
				16. Nearest source of possible contamination: ft 220 Direction 4p Type Soil 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. Hughes Drilling Co 126 Business name _____ License No. _____ Address Salina Kans Signed Ol Jout Date 8-12-77 Authorized representative			
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

13-4033 NE SW NE
1/4 1/4 1/4

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

Form WWC-5