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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

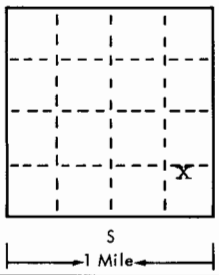
Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Ellis	Victoria	SE ¼ xSE¼	27	14	16

Distance and direction from nearest town or city:
4½ miles South of Walker, Kansas
Street address of well location if in city:

3 Owner of well:
Address: Norbet F. Robben
R.R. Victoria, Kansas67671

Locate with "X" in section below:



Sketch map:

Well is in the North West ¼ of the Southeast ¼ of the Southeast ¼

2 Type and color of material	From	To
Top Soil	0	3'
Sandy Clay	3'	14'
Sand and gravel	14'	25'
(use a second sheet if needed)		

4 Well depth: 25 ft. Date of completion 7-25-76
Well diameter 6 in.

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐ _____

7 Casing: Material pvc Height: above/below
Threaded ☐ Welded ☒ Surface 24 in.
Diam. Weight ____ lbs./ft.
6 in. to 25 ft. depth Drive shoe? ☐ Yes ☒ No
____ in. to ____ ft. depth

8 Screen:
Manufacturer _____
Type _____ Dia. 6
Slot/gauze 1/16" Length 10'
Set between 15 ft. and 25 ft.
Fittings: ¼"
Gravel pack ☒ Yes ☐ No Size range of material ____

9 Static water level:
15 ft. below land surface Date 8/27

10 Pumping level below land surfaces:
20 ft. after 6 hrs. pumping 8 g.p.m.
20 ft. after 12 hrs. pumping 8 g.p.m.
Estimated maximum yield 10 g.p.m.

11 Water sample submitted:
☐ Yes ☒ No Date _____

12 Well head completion:
☒ Pitless adapter ☐ Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 300 Direction S W Type septic tank
Well disinfected upon completion? ☐ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Centrifugal ☐ Other

16 Remarks: elevation
Well is up slight slope from house and creek.

Topography:
☐ Hill
☒ Slope
☐ Upland
☐ Valley

Owner is to put in curb and grade

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.
Oscar Rush 310
Business name License No.
Address Natoma, Kansas
Signed _____ Date _____
Authorized representative

1/4 NW 27 SESE

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5