

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 ELLIS	Fraction NW 1/4 NW 1/4 S. E. 1/4	Section number 1	Township number T 14 S R 18 E/W	Range number 18
2. Distance and direction from nearest town or city: Street address of well location if in city: 3 Mi. E of Hays				3. Owner of well: Joe Jacobs R.R. or street: RR-1 City, state, zip code: Hays, Ks. 67601		
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. 6 in. Completion date 4-26-80 Well depth 31 ft.	
					7. <input type="checkbox"/> Cable tool <input 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					8. Use: <input 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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
					9. Casing: Material PLST Height: above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 16 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 31 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 0258	
					10. Screen: Manufacturer's name Jess + Lo Well Type RMP Dia. 5 in Slot/gauze 06 (1-16) Length 10 Set between 21 ft. and 31 ft. _____ ft. and _____ ft. Gravel pack? <input type="checkbox"/> Size range of material _____	
					11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____	
					12. Pumping level below land surfaces: 26 ft. after 2 hrs. pumping 15 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 15 g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
					14. Well head completion: <input type="checkbox"/> Pitless adapter 16 inches above grade	
					15. Well grouted? <input type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 20 ft. to 24 ft.	
					16. Nearest source of possible contamination: ft. 15 Direction South Type Stream Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: _____ Not installed Manufacturer's name DAMPSTER Model number _____ HP 1/2 Volts 220 Length of drop pipe 30 ft. capacity 15 g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
					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. Business name _____ License No. _____ Address _____ Signed Raymond Karpal Date 4-26-80 Authorized representative	
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5