

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

R. Cooper

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|--|--|------------------------|---|--|--------------------------------|-----------------------------------|
| 1. Location of well: | | County <i>Ellis</i> | Fraction <i>NE 1/4 NW 1/4 NW 1/4</i> | Section number <i>11</i> | Township number <i>T 14</i> | Range number <i>S R 18 E/W</i> |
| 2. Distance and direction from nearest town or city: <i>S. E. approx. 1 1/2 Miles from Hays, Ks.</i> | | | | 3. Owner of well: <i>G. & M. Mobile Home Park</i> Route # <i>1</i> City, state, zip code: <i>Hays, Kansas 67601</i> | | |
| 4. Locate with "X" in section below: | | Sketch map: | | <input checked="" type="checkbox"/> Bore hole dia. <i>9</i> in. Completion date <i>9/1</i> Well depth <i>64</i> ft. | | |
| | | | | 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 type="checkbox"/> Domestic <input checked="" 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 | | |
| <i>top soil</i> | | <i>0</i> | <i>5</i> | <input checked="" type="checkbox"/> Casing: Material <i>city</i> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>24</i> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <i>22</i> lbs./ft. Dia. <i>5</i> in. to <i>64</i> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <i>250</i> | | |
| <i>yellow clay-gumbo</i> | | <i>5</i> | <i>35</i> | <input checked="" type="checkbox"/> Screen: Manufacturer's name <i>JL</i> Type <i>city</i> Dia. <i>6</i> Slot/gauge <i>.031</i> Length <i>10</i> Set between <i>54</i> ft. and <i>64</i> ft. <input type="checkbox"/> Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>1/2</i> | | |
| <i>sandy clay</i> | | <i>35</i> | <i>43</i> | <input checked="" type="checkbox"/> Static water level: <i>30</i> ft. below land surface Date <i>10/15/99</i> mo./day/yr. | | |
| <i>sand + gravel</i> | | <i>43</i> | <i>61</i> | 12. Pumping level below land surfaces: <i>40</i> ft. after <i>2</i> hrs. pumping <i>30</i> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>30</i> g.p.m. | | |
| <i>Blue shale</i> | | <i>61</i> | <i>64</i> | <input checked="" type="checkbox"/> Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____ | | |
| <i>TD</i> | | <i>64</i> | | 14. Well head completion: <input type="checkbox"/> Pitless adapter <i>18</i> inches above grade | | |
| | | | | 15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>20</i> ft. | | |
| | | | | 16. Nearest source of possible contamination: ft. <i>103</i> Direction <i>west</i> Type <i>sewer</i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | 17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ 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 | | |
| | | | | <input checked="" type="checkbox"/> 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. <i>Hout Water Well</i> Business name _____ License No. <i>199</i> Address <i>Hays</i> Signed <i>MP Hout</i> Date <i>10/15/99</i> Authorized representative | | |
| 18. Elevation: | | 19. Remarks: | | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | |

14 18 W E
 Sec 11 NE 1/4 1/4 1/4

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

Form WWC-5