

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

<input checked="" type="checkbox"/> Location of well:	County <u>Ellis</u>	<input checked="" type="checkbox"/> Fraction <u>SE 1/4 NE 1/4 NE 1/4</u>	Section number <u>16</u>	Township number <u>T 14</u>	Range number <u>S R 18</u>	EW <u>(2)</u>
2. Distance and direction from nearest town or city: <u>2.5 mile south</u>		3. Owner of well: <u>Pat Newberger</u>				
Street address of well location if in city: <u>from Hays, Ks,</u>		<input checked="" type="checkbox"/> R.R. or street: _____ City, state, zip code: <u>Hays, Ks 27659</u>				
<input checked="" type="checkbox"/> Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date _____ Well depth <u>60</u> ft. <u>4-26-79</u>		
		<p>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</p> <p>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</p>		9. Casing: Material <u>plts</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <u>gl.</u> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>40</u> ft. depth Wall Thickness: _____ inches or Dia. _____ in. to _____ ft. depth gage No. <u>444</u>		
				10. Screen: Manufacturer's name <u>Jess + Lowell</u> Type <u>plts</u> Dia. <u>5</u> <input checked="" type="checkbox"/> Slot gauze _____ Length <u>20</u> Set between <u>40</u> ft. and <u>60</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8 - 3/8</u>		
5. Type and color of material		From	To	11. Static water level: _____ mo./day/yr. <u>40</u> ft. below land surface Date <u>4-26-79</u>		
<u>Top soil w/ clay (Brown)</u>		<u>0</u>	<u>37</u>	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>12 Bailing</u> g.p.m.		
<u>7 Gray sand w/ clay (Brown)</u>		<u>37</u>	<u>47</u>	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
<u>Med L. sand w/ coarse sand + white gravel</u>		<u>47</u>	<u>59</u>	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade		
<u>Dark Blue Shale</u>		<u>59</u>	<u>60</u>	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>5</u> ft. to <u>16</u> ft.		
				16. Nearest source of possible contamination: _____ g.ptic ft. <u>45</u> Direction <u>West</u> Type <u>shale</u> 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		
				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. <u>Luehatah Wells Drilling</u> <u>276</u> Business name _____ License No. _____ Address <u>503 Monroe, Ellis Ks</u> Signed <u>John Luehatah</u> Date <u>5-5-79</u> Authorized representative		
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		<u>redo not install pumps</u>				

14 18 26 SE NE NE

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

Form WWC-5