

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 NE 1/4 NE 1/4 NE 1/4		Section number 25		Township number T 14 S R 18 E/W		Range number 18		
2. Distance and direction from nearest town or city: Munjor, Kansas				3. Owner of well: Alfred Augustine						
Street address of well location if in city:				R.R. or street: Munjor, Ks.						
City, state, zip code:										
4. Locate with "X" in section below:			Sketch map:			6. Bore hole dia. 9 in. Completion date 5-14-79				
						Well depth 40 ft.				
						7. 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				
						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 PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 16 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 200 lbs./ft. Dia. 5 in. to 40 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. .26				
5. Type and color of material			From		To		10. Screen: Manufacturer's name Jet Stream			
Topsoil			0		4		Type pvc Dia. 5			
fine sand			4		30		Slot/gauze slot Length 10			
medium sand			30		36		Set between 30 ft. and 40 ft.			
blue shale			36		40		Gravel pack? <input checked="" type="checkbox"/> Size range of material 3-8			
							11. Static water level: 30 ft. below land surface Date 5-14-79			
							12. Pumping level below land surfaces: 30 ft. after 1 hrs. pumping 10 g.p.m.			
							____ ft. after ____ hrs. pumping ____ g.p.m.			
							Estimated maximum yield 10 g.p.m.			
							13. Water sample submitted: ____ mo./day/yr.			
							Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date ____			
							14. Well head completion: 16 Inches above grade			
							____ Pitless adapter			
							15. Well grouted? <input checked="" type="checkbox"/>			
							With: ____ Neat cement <input checked="" type="checkbox"/> Bentonite ____ Concrete			
							Depth: From 0 ft. to 10 ft.			
							16. Nearest source of possible contamination: none			
							ft. ____ Direction ____ Type ____			
							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:								
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Flatland <input type="checkbox"/> Valley										
		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. First Water Well 199 Business name License No. Address Shaw, Kansas Signed Mel Karst Date 5/14/79 Authorized representative								

T 14 S R 18 E/W
 NE 1/4 NE 1/4 NE 1/4

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

Form WWC-5