

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 Saline	Fraction NE 1/4 NW 1/4 NE 1/4	Section number 14	Township number T 14 S R 2W E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city: 2 Mi. E. of Salina			3. Owner of well: Win Hoeffner R.R. or street: Rt. 3 City, state, zip code: Salina Kans. 67401			
4. Locate with "X" in section below:		Sketch map: Well No. 6, 6th lot from west			6. Bore hole dia. 6 in. Completion date 12-9-77 Well depth 78 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 in feet below surface:		From	To	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		
Alluvium				9. Casing: Material _____ Height: <u>Above</u> or below Threaded _____ Welded _____ Surface 12 in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. 4 in. to 78 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 16 300		
Clay, gray-brown		0	9	10. Screen: Manufacturer's name Ship Type slots Dia. 4" Slot/gauze 3/32" Length 20' Set between 58 ft. and 78 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/8		
Gravel, medium, silty		9	19	11. Static water level: _____ mo./day/yr. 30.5 ft. below land surface Date 12-9-77		
Wellingtons fm.				12. Pumping level below land surfaces: 60 ft. after 1 hrs. pumping 3 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 5 g.p.m.		
Shale, gray & green		19	58	13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date 12-27-77		
Shale, gray & gypsum		58	78	14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> Y With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 13 ft.		
				16. Nearest source of possible contamination: ft. 880 Direction W Type Creek 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:		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. Hydraulic Drilling 126 Business name _____ License No. _____ Address Salina, Kas. Signed Ol. Fent Date 12-17-77 Authorized representative			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

T 14
R 2W
E
Sec 14
1/4 1/4 1/4

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

Form WWC-5