

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 NW 1/4 NW 1/4 NE 1/4	Section number 14	Township number T 14 S	Range number R 2W E/W
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: Wm Hoeffner R.R. or street: Rt. 3 City, state, zip code: Salina Ks. 67401			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 6 in. Completion date _____ Well depth 80 ft. 12-2-77		
		<p style="text-align: center;">Well No. 4, 4th lot from west</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		
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 80 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gage No. No 200
Clay + silt, brown				0	14	10. Screen: Manufacturer's name SLIP Type slots Dia. 4" Slot/gauze 3/32 Length 20' Set between 60 ft. and 80 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/8
Gravel, medium, silty				14	19	11. Static water level: _____ mo./day/yr. 31 ft. below land surface Date 12-2-77
Wellington fm:						12. Pumping level below land surfaces: 61 ft. after 1 hrs. pumping 5 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 8 g.p.m.
Shale, gray + green				19	72	13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date 12-27-77
Shale, gray + gypsum				72	80	14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade
						15. Well grouted? <input checked="" type="checkbox"/> 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. 550 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 Kansas Signed O.P. Faust Date 12-19-77 Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

14 20 14 NW 1/4

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

Form WWC-5