

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	Range number S R 2W E/W
2. Distance and direction from nearest town or city: Street address of well location if in city: 2 Mi. E. 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 78 ft. 12-13-77		
		<p style="font-size: 1.5em; text-align: center;">Well No 7, 7th lot from west</p>		7. <input checked="" 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 + colluvium:						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. No 200
Clay, brown				0	19	10. Screen: Manufacturer's name Skop Type slots Dia. 4" Slot/gauze 3/32" Length 25' Set between 53 ft. and 79 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/8
Gravel, medium + clay				19	30	11. Static water level: _____ mo./day/yr. 30 ft. below land surface Date 12-13-77
Clay, gray-brown				30	36	12. Pumping level below land surfaces: 59 ft. after 1 hrs. pumping 4 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
Wellington fm:						13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date 12-27-77
Shale, gray + green				36	78	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. 1050 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)						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, Ks Signed Art Faust Date 12-17-77 Authorized representative
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

T 14 R 2W E 14 NE 1/4

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

Form WWC-5