

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-100 1215

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

*When built location*

1. Location of well: <b>TREGO</b>		County	Fraction	Section number	Township number	Range number
		<b>TREGO</b>	<b>NE 1/4 NE 1/4 NE 1/4</b>	<b>33</b>	<b>T 14</b>	<b>S R 22</b>
2. Distance and direction from nearest town or city: <b>145 SW 2 N 1 E</b>			3. Owner of well: <b>CHRISTIAN SERU. CAMP</b>			
Street address of well location if in city: <b>OGALLALA, KS.</b>			R.R. or street: <b>CEDAR BLUFF LAKE</b>			
4. Locate with "X" in section below:			Sketch map:			6. Bore hole dia. <b>2 1/2</b> in. Completion date <b>10-28-77</b>
						Well depth <b>470</b> ft.
5. Type and color of material			From	To	7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug	
yellow clay + rocks			0	22	<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
Blue shale			22	201	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry	
Green Horn Shale			201	389	<input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock	
Dakota clay (white)			389	430	<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
GRANDERIS			430	435	9. Casing: Material <b>STI</b> Height: Above or below	
sandstone			435	470	Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>20</b> in.	
white dakota clay to			470	471	RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>320</b> lbs./ft.	
BROCKS 22.					Dia. <b>5</b> in. to <b>470</b> ft. depth Wall Thickness: inches or	
					Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>120</b>	
					10. Screen: Manufacturer's name <b>J+L</b>	
					Type <b>Styrene</b> Dia. <b>5"</b>	
					Gauge <b>2010</b> Length <b>2010</b>	
					Set between <b>450</b> ft. and <b>470</b> ft.	
					ft. and <input type="checkbox"/> ft.	
					Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>4-12</b>	
					11. Static water level: <input type="checkbox"/> mo./day/yr.	
					<b>450</b> ft. below land surface Date <b>10-28-77</b>	
					12. Pumping level below land surfaces:	
					<b>450</b> ft. after <b>4</b> hrs. pumping <b>5</b> g.p.m.	
					<input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.	
					Estimated maximum yield <b>5</b> g.p.m.	
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr.	
					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
					14. Well head completion:	
					<input type="checkbox"/> Pitless adapter <b>20</b> inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/>	
					With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete	
					Depth: From <b>0</b> ft. to <b>23</b> ft.	
					16. Nearest source of possible contamination: <b>NONE</b>	
					ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/>	
					Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input checked="" type="checkbox"/> Not installed	
					Manufacturer's name <input type="checkbox"/>	
					Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/>	
					Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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	
18. Elevation:			19. Remarks:			20. Water well contractor's certification:
Topography:			<b>2211</b>			This well was drilled under my jurisdiction and this report
<input type="checkbox"/> Hill			<b>22</b>			is true to the best of my knowledge and belief.
<input type="checkbox"/> Slope			<b>2189</b>			<b>KARST WATER WELL DRILLERS.</b>
<input type="checkbox"/> Upland						Business name <input type="checkbox"/> License No. <b>195B</b>
<input checked="" type="checkbox"/> Valley						Address <b>Highway 40 Ways</b>
						Signed <b>M.B. KARR</b> Date <b>10-28</b>
						Authorized representative

T 14 R 22 S 33 NE 1/4

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

Form WWC-5