

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 Gove	Fraction NW 1/4 NE 1/4 NE 1/4	Section number 22	Township number T 14	Range number S R 27	DRL EW
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: Rex Albin R.R. or street: Quinter, Ks. 67752 City, state, zip code:			
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. 8 in. Completion date 3/22/78 Well depth 85 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			
			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			
5. Type and color of material			9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface 12 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 85 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gage No. 250			
			10. Screen: Manufacturer's name Peerless Plastics Type PVC Dia. 5 in. Slot/gauze 1/16 Length 10 ft. Set between 75 ft. and 85 ft. _____ ft. and _____ ft.			
			11. Static water level: 37 ft. below land surface Date 3/22/78 mo./day/yr.			
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.			
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade			
			15. Well grouted? <input checked="" type="checkbox"/> With Clay Neat cement _____ Bentonite _____ Concrete _____ Depth: From 0 ft. to 5 ft.			
			16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ 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. Aqua Well Drilling 281 Business name Gove, Ks. 67736 License No. _____ Address _____ Signed J. M. Juttler Date 4-78 Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5