

OR BALL
PRESS FIRMLY,
EARLY.

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 SE 1/4 SE 1/4 SW 1/4	Section number 13	Township number T 14 S	Range number R 29	DRL EW
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:				
9 S of Gove			Wayne Beesley Gove, Kansas 67736				
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>45</u> ft. <u>9-15-76</u>		
					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		
					<input checked="" type="checkbox"/> Casing: Material <u>plastic</u> Height: <u>above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>45</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
5. Type and color of material		From	To	10. Screen: Manufacturer's name <u>Peerless</u> <u>Plastic Pipe</u> Type <u>PVC</u> Dia. <u>5 in.</u> Slot/gauze <u>1/16</u> Length <u>10 ft</u> Set between <u>35</u> ft. and <u>45</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/4 down</u>			
<u>silt + clay</u>		<u>0</u>	<u>38</u>				
<u>sand</u>		<u>39</u>	<u>45</u>				
<u>shale</u>		<u>45</u>					
				11. Static water level: _____ mo./day/yr. <u>32</u> ft. below land surface Date <u>9-15-76</u>			
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>10</u> 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: <u>clay</u> cement _____ Bentonite _____ Concrete _____ Depth: From <u>0</u> ft. to <u>20</u> ft.			
				<input checked="" type="checkbox"/> Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? _____ 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			
				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. <u>Aqua Well Drilling</u> <u>281</u> Business name License No. Address <u>Gove, Kansas 67736</u> Signed <u>J. M. Intelle</u> Date <u>10-20-77</u> Authorized representative			
18. Elevation:	19. Remarks:						
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