

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 ELLIS	Fraction N 1/4 NW 1/4 NE 1/4	Section number 5	Township number T 15 S	Range number R 16 E
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:		
4. Locate with "X" in section below:			6. Bore hole dia. 19 in. Completion date 8-30-76 Well depth 36 ft.		
			Sketch map: COUNTY ROAD PASTURE well ALFALFA		
5. Type and color of material			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 type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		
			9. Casing: Material PVC Height Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 36 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 12 in. to 36 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 160		
			10. Screen: Manufacturer's name HOME MADE Type Holes Dia. 12" Slot/gauze _____ Length 11" Set between 24 ft. and 35 ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 4-1/2"		
			11. Static water level: _____ mo./day/yr. 25 ft. below land surface Date 8-76		
			12. Pumping level below land surfaces: 33 ft. after 4 hrs. pumping 90 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 90 g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
			14. Well head completion: <input type="checkbox"/> Pitless adapter 36 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 TOP ft. to 10 ft.		
			16. Nearest source of possible contamination: NONE ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: Not installed Manufacturer's name E+W Model number 50TR10 HP 5 Volt 230 Length of drop pipe 28 ft. capacity 90 g.p.m. Type: <input checked="" 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:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					
		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. PARST WATER WELL DRILLING Business name License No. _____ Address HIWAY 40 HAYS 194B Signed MB. Kay Date 8-76 Authorized representative			

T 15 S
 R 16 E
 Sec 5
 1/4 1/4 1/4

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

Form WWC-5