

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 NE 1/4 NE 1/4 NW 1/4	Section number 3	Township number T 15 S R 26	Range number 26	DRL
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: Sketch map:			6. Bore hole dia. <u>22</u> in. Completion date _____ Well depth <u>99</u> ft. <u>4/6/77</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 checked="" 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				
5. Type and color of material			9. Casing: Material <u>1 1/2</u> Height: <u>above</u> below Threaded <input type="checkbox"/> Welded <u>5 1/2</u> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>99</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____				
			10. Screen: Manufacturer's name <u>Peerless Plastics</u> Type <u>PVC</u> Dia. <u>16 in.</u> Slot/gauze <u>8</u> Length <u>20 ft.</u> Set between <u>39</u> ft. and <u>99</u> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3 down</u>				
			11. Static water level: _____ mo./day/yr. <u>10</u> ft. below land surface Date <u>4/6/77</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>1400</u> 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 _____ inches above grade <input checked="" type="checkbox"/> Well grouted? <input checked="" type="checkbox"/> <u>Cement slab</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>5</u> ft.				
			15. Nearest source of possible contamination: _____ 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				
			(Use a second sheet if needed)				
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					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 _____ License No. _____ Address <u>Gove, Ks. 67736</u> Signed <u>J. M. Jett</u> Date <u>6-20-77</u> Authorized representative		

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

Form WWC-5