

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

Austin Mann

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 SW 1/4 NE 1/4 SW 1/4	Section number 4	Township number T 15	Range number S R 26	DAV EW
X Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well: Dave Bollinger 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 _____ Well depth 45 ft. 5/8/75		
					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		
5. Type and color of material		From	To	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other			
silt		0	15	X Casing: Material Pvls Height: Above or below Threaded <input type="checkbox"/> Welded GI Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 45 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____			
blue mud		15	30	X Screen: Manufacturer's name _____ Perles Plastics Type PVC Dia. 5 in. Slot/gauze 46 Length 20 ft. Set between 35 ft. and 45 ft. _____ ft. and _____ ft.			
Mud + sand layers		30	45	Gravel pack? <input checked="" type="checkbox"/> Size range of material 1 down			
Niobrara Shale		45		11. Static water level: _____ mo./day/yr. 15 ft. below land surface Date 5/8/75			
				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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade			
				15. Well grouted? yes With: slay neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 20 ft.			
				X Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				Aqua Well Drilling 281 Business name License No. Address Gove, Ks. 67736 Signed J. M. Lott Date 6-20-77 Authorized representative			

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

Form WWC-5