

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 <b>Gove</b>	Fraction <b>1/4 SW 1/4 NW 1/4</b>	Section number <b>8</b>	Township number <b>T 15 S</b>	Range number <b>R 26 E</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well: <b>Delaine Jacka</b> R.R. or street: <b>Quinter, Ks. 67752</b> City, state, zip code:		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>22</b> in. Completion date <b>6/8/77</b> Well depth <b>108</b> ft.		
		7. <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input checked="" 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		
		9. Casing: Material <b>plts</b> Height <b>12</b> Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <input type="checkbox"/> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>16</b> in. to <b>108</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gauge No. <b>1/2</b> in.				
		10. Screen: Manufacturer's name <b>Peerless Plastics</b> Type <b>PVC</b> Dia. <b>16</b> in. Slot/gauze <b>1/8</b> in. Length <b>48</b> ft. Set between <b>60</b> ft. and <b>108</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/2</b> down		11. Static water level: <input type="checkbox"/> mo./day/yr. <b>19</b> ft. below land surface Date <b>6/8/77</b>		
		12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>1500</b> g.p.m.		13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
5. Type and color of material		From	To	14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
silt and blue clay		0	60	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>5</b> ft.		
gravel <del>in</del>		60	108	16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
shale			108	17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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)				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. <b>Aqua Well Drilling 281</b> Business name <b>Gove, Ks. 67736</b> License No. <input type="checkbox"/> Address <input type="checkbox"/> Signed <b>J M Swindle</b> Date <b>7-10-77</b> Authorized representative		
18. Elevation:		19. Remarks:		21. Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		

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

Form WWC-5