

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

1503

1. Location of well:		County Leban	Fraction NW 1/4 SE 1/4 SE 1/4	Section number 8	Township number T 15 S R 36	Range number 36
2. Distance and direction from nearest town or city: 2 1/4 mi North of Leoti, Ks Street address of well location if in city:				3. Owner of well: Robert Harkness R.R. or street: Rte #2 City, state, zip code: Scott City, Ks. 67871		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 7/8 in. Completion date _____ Well depth 54 ft. 8-3-78		
				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				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		
				9. Casing: Material Plstc Height: Above or below Threaded _____ Welded glu Surface _____ in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 54 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. Sch 40		
				10. Screen: Manufacturer's name _____ Jesse-Lowell Type Plastic Dia. 5" Slot/gauze 1/16 Length 10 Set between 44 ft. and 54 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material 1/2		
				11. Static water level: _____ mo./day/yr. 20 ft. below land surface Date 4-10-78		
				12. Pumping level below land surfaces: 30 ft. after 1 hrs. pumping 20 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 20 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 checked="" type="checkbox"/> Pitless adapter _____ inches above grade		
				15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From 15 ft. to 4 ft.		
				16. Nearest source of possible contamination: NA ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No		
				17. Pump: _____ Not installed Manufacturer's name Jacuzzi Model number SLB-26-B HP 1 1/2 Volts _____ Length of drop pipe 44 ft. capacity 20 g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other		
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 checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley				High Plains Drilling & Supply, Inc. 136B Business name _____ License No. _____ Address: 102 N. 3rd, Garden City, Ks. Signed: Arthur H. ... Date: 8-25-78 Authorized representative		

T 15 S R 36 W 1/4 SE SE
 Sec 8 NW SE SE
 1/4 1/4 8/4

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

Form WWC-5