

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 Wichita	Fraction NE 1/4 NW 1/4 NW 1/4	Section number 22	Township number T 16 S R 38 E	Range number 38 E
2. Distance and direction from nearest town or city: 12N, 7 1/2 W, 1/4 S, 1/4 W			3. Owner of well: Willard Kalbach			
Street address of well location if in city: of Leoti, KS			R.R. or street: City, state, zip code: Leoti, KS 67861			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>26</u> in. Completion date _____ Well depth <u>202</u> ft. <u>11-14-74</u>		
				7. Cable tool <input 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		
5. Type and color of material		From	To	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		
Clay		0	35	9. Casing: Material <u>Steel</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>10</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>31.67</u> lbs./ft. Dia. <u>16</u> in. to <u>202</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>188</u>		
Sd coarse		35	39	10. Screen: Manufacturer's name _____ <u>Free Flow</u> Type <u>Prime Steel</u> Dia. <u>16 in.</u> Gauge <u>125</u> Length <u>50 ft.</u> Set between <u>152</u> ft. and <u>202</u> ft. _____ ft. and _____ ft.		
Clay		39	50	Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>5/8-1/4</u>		
Sd coarse		50	56	11. Static water level: _____ mo./day/yr. <u>123</u> ft. below land surface Date <u>8-23-74</u>		
Clay		56	64	12. Pumping level below land surfaces: <u>156</u> ft. after <u>4</u> hrs. pumping <u>1000</u> g.p.m. <u>160</u> ft. after <u>4</u> hrs. pumping <u>1050</u> g.p.m. Estimated maximum yield <u>1050</u> g.p.m.		
Sd coarse		64	70	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
Clay		70	95	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade		
Sd rock		95	100	15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
Clay		100	105	16. Nearest source of possible contamination: ft. <u>600</u> Direction <u>N</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Fine sd clay		105	113	17. Pump: Manufacturer's name <u>Layne & Bowler</u> Not installed Model number _____ HP _____ Volts _____ Length of drop pipe <u>190</u> ft. capacity <u>1050</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
Clay		113	125			
Fine sd clay		125	139			
Sd coarse		139	182			
Clay		182	184			
Sd rock		184	186			
Sd fine		186	200			
18. Elevation:		19. Remarks: Sellow		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. <u>Weishaar Drilling</u> 232 Business name License No. Address <u>Scott Clay, KS 67871</u> Signed <u>[Signature]</u> Date <u>7-17-76</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		200 205				

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NE
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1/4

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

Form WWC-5