

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

SHIELDS

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

AAA

1. Location of well:		County <u>Lane</u>	Fraction <u>NE 1/4 NE 1/4 NE 1/4</u>	Section number <u>18</u>	Township number T <u>17</u> S <u>R</u>	Range number <u>28</u> EW		
2. Distance and direction from nearest town or city: <u>7N, 1E of</u> Street address of well location if in city: <u>Dighton, KS</u>			3. Owner of well: <u>Fuller &amp; Stroup</u> R.R. or street: City, state, zip code: <u>Dighton, KS 67839</u>					
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 			6. Bore hole dia. <u>9</u> in. Completion date <u>9-20-75</u> Well depth <u>155</u> ft.		
5. Type and color of material			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			8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input 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 <u>Plas.</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>1.8</u> lbs./ft. Dia <u>5</u> in. to <u>135</u> ft. depth; Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth; gage No. <input type="checkbox"/>			10. Screen: Manufacturer's name <u>Jess &amp; Lowell</u> Type <u>Plastic</u> Dia. <u>5</u> Slot/gauze <input type="checkbox"/> Length Set between <u>135</u> ft. and <u>155</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <u>yes</u> Size range of material <u>#1</u>		
			11. Static water level: <u>96</u> ft. below land surface Date <u>9-20-75</u> mo./day/yr.			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 <input type="checkbox"/> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date			14. Well head completion: <u>NA</u> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
			15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>15</u> ft.			16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <u>N</u> Type <u>Feedlot</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name 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			18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		
19. Remarks: <u>2777 (TOP)</u> <u>BROCK 155'</u>			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> <u>232</u> Business name License No. Address <u>Scott City, KS 67871</u> Signed <u>[Signature]</u> Date <u>10-11</u> Authorized representative					

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

Form WWC-5