

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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WATER WELL RECORD
KSA 82a-1201-1215

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

Ryence #1

1. Location of well:	County <i>Rush</i>	Fraction <i>CS 1 SE NE</i> 1/4 1/4 1/4	Section number <i>26</i>	Township number <i>18 S</i>	Range number <i>20 W</i>
2. Distance and direction from nearest town or city: <i>3 miles East</i>		3. Owner of well: <i>D N B Drilling Co</i>			
Street address of well location if in city: <i>Alexander</i>		City, state, zip code: <i>Wichita Kansas</i>			
4. Locate with "X" in section below:		Sketch map:			
5. Type and color of material		6. Bore hole dia. <i>8</i> in. Completion date <i>8-27-77</i>			
		Well depth <i>60</i> ft.			
		7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary			
		8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other			
		9. Casing: Material <i>Plastic</i> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>12</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <i>287.3</i> lbs./ft. Dia. <i>5</i> in. to <i>60</i> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Page No. <i>200</i>			
		10. Screen: Manufacturer's name <i>Self made</i> Type <i>18vc</i> Dia. <i>5</i> Slot gauge <i>1/8</i> Length <i>20</i> Set between <i>40</i> ft. and <i>60</i> ft. Gravel pack? <i>yes</i> Size range of material <i>1/8 - 1/4</i>			
		11. Static water level: <i>20</i> ft. below land surface Date <i>8-27-77</i>			
		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: ma./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date			
		14. Well head completion: Pitless adapter <input type="checkbox"/> Inches above grade			
		15. Well grouted? <i>yes</i> With: Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete <input type="checkbox"/> Depth: From <i>0</i> ft. to <i>10</i> ft.			
		<input checked="" type="checkbox"/> Nearest source of possible contamination: ft. Direction Type <i>None</i> Well disinfected upon completion? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
		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: Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other <input type="checkbox"/>			
18. Elevation:		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. <i>Myers Water Well</i> Business name <i>St. Bernard Ks</i> License No. <i>143</i> Address <i>St. Bernard Ks</i> Signed <i>A. Myers</i> 8-27-77 Authorized representative			
19. Remarks: <i>BR ≥ 60' fm</i>					

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

Form WWC-5