

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 Lane	Fraction N/E 1/4 S/E 1/4 N/W 1/4	Section number 25	Township number T 18 S R 28 4/W	Range number
2. Distance and direction from nearest town or city: 5 E., 1 S., 1/2 E., 1/4 S. of Dighton, KS Street address of well location if in city:			3. Owner of well: Dwayne Seifried R.R. or street: 220 S. Delaware City, state, zip code: Dighton, Kansas 67839			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 in. Completion date Well depth 50 ft. 10/7/1978		
		<p style="text-align: center;">well feed lot</p> <p style="text-align: center;">X ----- 50' ----- X</p>		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		From		To		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 Plastic Weight: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight 1.8 lbs./ft. Dia. 5 in. to 30 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. 250
						10. Screen: Manufacturer's name Jess & Lowell Type RMP Dia. 5" Slot/gauze 1/16" Length 20' Set between 30 ft. and 50 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> yes Size range of material <input checked="" type="checkbox"/> 1/8"
						11. Static water level: <input type="checkbox"/> mo./day/yr. 36 ft. below land surface Date 10/6/78
						12. Pumping level below land surfaces: 42 ft. after 1 hrs. pumping 10 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 10 g.p.m.
						13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
						14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 12 Inches above grade
						15. Well grouted? <input checked="" type="checkbox"/> yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 15 ft.
						16. Nearest source of possible contamination: ft. 50 Direction E Type Feed Lot Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Red Jacket Model number 7BB HP 1/2 Volts 230 Length of drop pipe 45 ft. capacity 10 g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
						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. Weishaar Drilling & Supply 252 Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address 8041 01th, KS 67871 Signed [Signature] Date 10/10/78 Authorized Representative
18. Elevation:		19. Remarks:		(Use a second sheet if needed)		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 18 S R 28 4/W
 Sec 25
 N/E S/E 1/4 N/W 1/4

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

Form WWC-5