

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: <b>Lane</b>		Fraction <b>S/E 1/4 S/E 1/4 S/E 1/4</b>		Section number <b>14</b>		Township number <b>T 18 S R 30 #W</b>		Range number <b>30</b>	
2. Distance and direction from nearest town or city: <b>1/4 mile East of Amy, Kansas</b>				3. Owner of well: <b>Orville Krehbiel</b>					
Street address of well location if in city:				R.R. or street: <b>Healy, Kansas 67850</b>					
City, state, zip code:									
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile				Sketch map: <b>well X ----- 125' ----- X farm house</b>		6. Bore hole dia. <b>9</b> in. Completion date <b>10-4-1978</b> Well depth <b>106</b> ft.			
						7. <input checked="" 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 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 <b>Plastic</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Glue Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>1.8</b> lbs./ft. Dia. <b>5</b> in. to <b>86</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>250</b>			
5. Type and color of material				From		To		10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b>	
<b>clay</b>				<b>0</b>		<b>27</b>		Type <b>RMP</b> Dia. <b>5"</b>	
<b>clay gyp streaks</b>				<b>27</b>		<b>32</b>		Slot/gauze <b>1/16"</b> Length <b>20'</b>	
<b>caly</b>				<b>32</b>		<b>48</b>		Set between <b>86</b> ft. and <b>106</b> ft. ft. and <b>106</b> ft.	
<b>sand rock H</b>				<b>48</b>		<b>63</b>		Gravel pack? <b>yes</b> Size range of material <b>1/8"</b>	
<b>sandy clay T</b>				<b>63</b>		<b>70</b>		11. Static water level: <b>74</b> ft. below land surface Date <b>10/2/78</b>	
<b>clay</b>				<b>70</b>		<b>75</b>		12. Pumping level below land surfaces: <b>80</b> ft. after <b>1</b> hrs. pumping <b>4</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>4</b> g.p.m.	
<b>sand rock H</b>				<b>75</b>		<b>76</b>		13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date	
<b>clay</b>				<b>76</b>		<b>79</b>		14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade	
<b>fine sand clay T</b>				<b>79</b>		<b>89</b>		15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.	
<b>med. sand</b>				<b>89</b>		<b>94</b>		16. Nearest source of possible contamination: ft. <b>125'</b> Direction <b>East</b> Type <b>Farm house</b>	
<b>sand rock</b>				<b>94</b>		<b>101</b>		Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>sand coarse T</b>				<b>101</b>		<b>104</b>		17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Aermotor</b> Model number _____ HP _____ Volts _____ Length of drop pipe <b>100</b> ft. capacity <b>4</b> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <b>cylinder</b> Other	
<b>clay yellow</b>				<b>104</b>		<b>106</b>			
(Use a second sheet if needed)									
18. Elevation:		19. Remarks:							
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley									
		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. <b>Weishaar Drilling &amp; Sup. 232</b> Business name _____ License No. _____ Address <b>Scott City, KS 67871</b> Signed _____ Date <b>10/10/78</b> Authorized representative							

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

Form WWC-5