

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

County Wichita		Fraction SE 1/4 SE 1/4 SE 1/4	Section number 13	Township number T 18 S R	Range number 36 W
1. Location of well: E of Leoti on Highway 96 Street address of well location if in city:			3. Owner of well: Kansas Dept. of Transportation State Office Bldg. R.R. or street: City, state, zip code: Topeka, Kansas 66612		
4. Locate with "X" in section below: N NW NE SW SE S E 1 Mile		Sketch map: N Shelter House - Garage Old Well Rest Rooms 200'± Drive		6. Bore hole dia. _____ in. Completion date _____ Well depth _____ ft.	
				7. Cable tool _____ Rotary _____ Driven _____ Dug _____ Hollow rod _____ Jetted _____ Bored _____ Reverse rotary _____	
				8. Use: Domestic _____ Public supply _____ Industry _____ Irrigation _____ Air conditioning _____ Stock _____ Lawn _____ Oil field water _____ Other _____	
				9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. _____	
5. Type and color of material		From	To	10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____	
Plug Old Water Well - Drilled in 1961				11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____	
T.D. 70 Feet				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.	
Pulled 4" casing.				13. Water sample submitted: _____ mo./day/yr. Yes _____ No _____ Date _____	
Filled with clean sand				14. Well head completion: Pitless adapter _____ Inches above grade	
to 20 feet - two foot				15. Well grouted? _____ With: Neat cement _____ Bentonite _____ Concrete _____ Depth: From _____ ft. to _____ ft.	
Dirt Plug - 18 feet of				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes _____ No _____	
concrete to ground level.				17. Pump: _____ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____	
Surface pipe left in place.					
New well drilled 10 feet south					
(Use a second sheet if needed)					
18. Elevation: Topography: ____ Hill ____ Slope ____ Upland X Valley	19. Remarks:			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. Ks. Dept. of Transportation Business name _____ License No. _____ Address Topeka, Kansas Signed <i>[Signature]</i> Date 11-4-71 Authorized representative	

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

Form WWC-5

MI-1023