

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 NESS | Fraction SE 1/4 SW 1/4 NE 1/4 | Section number 35 | Township number T 19 S | Range number R 22 E/W |
| 2. Distance and direction from nearest town or city: 9 1/2 MILES NORTH FROM HANSTON, KANSAS Street address of well location if in city: | | | 3. Owner of well: MRS. TOM BOWIE R.R. or street: City, state, zip code: HANSTON, KANSAS 67549 | | |
| 4. Locate with "X" in section below: N W E S 1 Mile 1 Mile | | Sketch map: | | 6. Bore hole dia. 30 in. Completion date 1/7/78 Well depth 98 ft. | |
| 5. Type and color of material | | From To | | 7. Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary | |
| | | | | 8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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 STEEL Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 1 1/2 in. to 58 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 288 | |
| | | | | 10. Screen: Manufacturer's name WA BROWN ENTERPRISES Type STEEL EXTRUDED Slot/gauze 1/8 Length 40' Set between 58 ft. and 98 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. 1/2 DOWN Gravel pack? YES Size range of material 30/40 | |
| BLACK TOPSOIL | | 0 3 | | 11. Static water level: <input type="checkbox"/> mo./day/yr. 36 ft. below land surface Date 10-15-77 | |
| BROWN CLAY | | 3 28 | | 12. Pumping level below land surfaces: 42 ft. after 4 hrs. pumping 1100 g.p.m. 66 ft. after 1 hrs. pumping 1278 g.p.m. Estimated maximum yield 1700-1800 g.p.m. | |
| GOOD SAND | | 28 55 | | 13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/> | |
| STROP OF BLUE CLAY | | 55 57 | | 14. Well head completion: <input type="checkbox"/> Pitless adapter 18 Inches above grade | |
| TAN CLAY SAND | | 57 75 | | 15. Well grouted? YES With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 41 ft. to 10 ft. | |
| YELLOW CLAY | | 75 79 | | 16. Nearest source of possible contamination: ft. 45 Direction NE Type DRAIN Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| GOOD CLEAN LOOSE SAND AND GRAVEL | | 79 95 | | 17. Pump: <input type="checkbox"/> Not installed Manufacturer's name WESTERN LAND ROLLER Model number TYPE C HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe 90 ft. capacity 1250 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other | |
| (Use a second sheet if needed) | | | | 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. DEAN WATERHOUSE DRILLING 243 Business name HANSTON, KANSAS 67549 License No. <input type="checkbox"/> Address HANSTON, KANSAS 67549 Signed <i>Dean Waterhouse</i> Date 1/16/78 Authorized representative | |
| 18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | 19. Remarks: | | | | |

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

Form WWC-5

19 22 E 35 SE SW NE
T R Sec 1/4 1/4 1/4