

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 Barton | Fraction 1/4 NW 1/4 NE 1/4 1/4 1/4 SE 1/4 | Section number 10 | Township number T 20 S R 13 NW | Range number |
| 2. Distance and direction from nearest town or city: 15 1/2 | | | 3. Owner of well: EUGENE SELLER | | | |
| Street address of well location if in city: GREAT BOND, KS | | | City, state, zip code: GREAT BOND, KS | | | |
| 4. Locate with "X" in section below: | | Sketch map: | | 6. Bore hole dia. 30 in. Completion date 3-27-76 Well depth 80 ft. | | |
| | | | | 7. <input type="checkbox"/> 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 | | |
| 5. Type and color of material | | From | | To | | 9. Casing: Material IRON Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 1 1/2 in. to 50 ft. depth Wall Thickness <input type="checkbox"/> inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 344 |
| | | | | | | 10. Screen: Manufacturer's name DOORS Type IRON Dia. 1 1/2 " Slot/gauze 18 Length 30 Set between 50 ft. and 80 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 18-34 " |
| Top Soil - Clay | | 0 | | 12 | | Static water level: <input checked="" type="checkbox"/> mo./day/yr. 15 ft. below land surface Date 3-27-76 |
| Sand - Gravel | | 12 | | 30 | | 12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. 50 ft. after 4 hrs. pumping 1000 g.p.m. Estimated maximum yield 1200 g.p.m. |
| Clay | | 30 | | 40 | | 13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/> |
| Sand - Gravel | | 40 | | 80 | | 14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade |
| | | | | | | 15. Well grouted? <input type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft. |
| | | | | | | 16. Nearest source of possible contamination: Farm ft. 1300 Direction E Type farm Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| | | | | | | 17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Grundfos Model number 3125 HP 60 Volts <input type="checkbox"/> Length of drop pipe 70 ft. capacity 1000 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 |
| | | | | | | 18. 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. Kelly's Water Well Service 186 Business name OK 2 Great Bond, KS License No. <input type="checkbox"/> Address Kelly, Price Date 3-78 Signed <input type="checkbox"/> Authorized representative |
| | | | | | | |
| 18. Elevation: | | 19. Remarks: | | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | | | | | | |

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

Form WWC-5

20 130 10
 T R E Sec
 1/4 NW 1/4 SE