

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 NE 1/4 NE 1/4 SE 1/4	Section number 17	Township number T 20 S R 22 E/W	Range number 22
2. Distance and direction from nearest town or city: 9 south, 4 west, 1/2 south of BAZINE KS.			3. Owner of well: ALEX DECHANT R.R. or street: City, state, zip code: BAZINE, KANSAS 67516			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>65</u> ft. <u>10/6/80</u>	
					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	
					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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
5. Type and color of material					9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface <u>18</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>45</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>200 plus</u>	
					10. Screen: Manufacturer's name _____ <u>jet stream</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>.040</u> Length <u>20'</u> Set between <u>45</u> ft. and <u>65</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>#1</u>	
					11. Static water level: _____ mo./day/yr. <u>26</u> ft. below land surface Date <u>10/4/80</u>	
					12. Pumping level below land surfaces: <u>36</u> ft. after <u>2</u> hrs. pumping <u>12</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>35</u> g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
					14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>18</u> Inches above grade	
					15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>-3</u> ft. to <u>-15</u> ft.	
					16. Nearest source of possible contamination: ft. <u>300</u> Direction <u>south</u> Type <u>fuel tanks</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: _____ Not installed Manufacturer's name <u>AERMOTOR</u> Model number <u>SD 12</u> HP <u>3/4</u> Volts <u>230</u> Length of drop pipe <u>46</u> ft. capacity <u>12</u> 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. <i>Alex Dechant</i> Business name _____ License No. _____ Address <u>_____</u> Signed <u>Alex Dechant</u> Date <u>10/7/80</u> Authorized representative	
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5