

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 NW SE SE 1/4 1/4 1/4	Section number 32	Township number T 20 S	Range number R 25 E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: ERNESTE MC VICKER R.R. or street: City, state, zip code: NESS CITY KANSAS 67560			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 8 in. Completion date 3 Well depth 48 ft. Nov 1977		
				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		
5. Type and color of material		From	To	8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input 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		
BROWN CLAY		0	18	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface 24 in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. 3 in. to 38 ft. depth Wall Thickness: inches or Dia. 3 in. to 38 ft. depth gage No. 250		
FINE SAND		18	24	10. Screen: Manufacturer's name _____ Type RMP Dia. 5" Slot/gauze 1/32 Length _____ Set between 38 ft. and 48 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material #1		
TAN CLAY		24	28	11. Static water level: _____ mo./day/yr. 20 ft. below land surface Date 10-3-77		
good clean sand + white		28	45	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 60+ g.p.m.		
ROCK				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
BLACK SHALE		45	50	14. Well head completion: <input type="checkbox"/> Pitless adapter 24 inches above grade		
				15. Well grouted? YES With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 5 ft. to 15 ft.		
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type WIL Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
18. Elevation:		(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 Watson License No. _____ Address HANSTON KANSAS Signed Dean Watson Date 5-20-77 Authorized representative		
19. Remarks: AND MC VICKER WILL RUN SLAB & SET PUMP Ernest E McVicker						

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

Form WWC-5

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