

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

BRC  
WATER WELL RECORD  
KSA 82a-1201-1215

beeler NW

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

SW NW NW

1 Location of well:		County <b>NESS</b>	Township name <b>JOHNSON</b>	Fraction <b>NW 1/4</b>	Section number <b>25</b>	Town number <b>20</b>	Range number <b>26</b>
Distance and direction from nearest town or city: <b>11 South 2 EAST FROM BEEFER</b>				3 Owner of well: <b>P. D. McVICKER, BEEFER KS</b>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <b>30</b> ft. Date of completion <b>7 NOV 75</b> Well diameter <b>5</b> in.			
				5 <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			
				6 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"/> Commercial <input type="checkbox"/> Test well			
				7 Casing: Material <b>PLASTIC</b> Weight: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>48</b> in. Diam. <b>5</b> in. to <b>10</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth!			
2		Type and color of material		From	To	8 Screen:	
		<b>TOP SOIL</b>		<b>0</b>	<b>4</b>	Manufacturer <b>V+L</b> Type <b>STYRENE</b> Dia. <b>5"</b> Slot/gauze <b>1/8</b> Length <b>20</b> Set between <b>10</b> ft. and <b>30</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>14 down</b>	
		<b>ROCKY CLAY</b>		<b>4</b>	<b>25</b>	9 Static water level: <b>12</b> ft. below land surface Date <b>7 NOV 75</b>	
		<b>YELLOW CLAY</b>		<b>25</b>	<b>28</b>	10 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.	
		<b>SHALE</b>		<b>28</b>	<b>30</b>	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
		<b>BROCK</b>				12 Well head completion: <input type="checkbox"/> Pitless adapter <b>18</b> inches above grade	
		<b>15' sat there</b>				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <b>0</b> ft. to <b>10</b> ft.	
						14 Nearest source of possible contamination: ft. <b>30</b> Direction <b>S</b> Type <b>PLUM</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
						15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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	
16 Remarks: elevation				17 Water well contractor's certification:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		<b>2431</b> <b>25</b> <b>74067</b>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>DEAN WATERHOUSE DRIG</b> Business name _____ License No. _____ Address <b>HANSTON KANSAS</b> Signed <b>Dean Waterhouse</b> Date <b>11-11-75</b> Authorized representative			

20  
26W  
25  
SW NW NW

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5