

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 Rice	Fraction SW 1/4 NE 1/4 SW 1/4	Section number 3	Township number T 21 S R 10	Range number EW
2. Distance and direction from nearest town or city: 1 1/2 Miles South of Raymond, KS Street address of well location if in city:			3. Owner of well: John Snider (?) R.R. or street: City, state, zip code: Raymond, KS 67573		
4. Locate with "X" in section below: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <p>Sketch map:</p> </div> <div> <p>NOTE: This is a manifold system. There are 6-30' wells at this location. Only one report will be sent for all 6 wells.</p> </div> </div>			6. Bore hole dia. 24 in. Completion date 4-28-77 Well depth 30 ea ft.		
5. Type and color of material			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		
			9. Casing: Material steel 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 30.3 lbs./ft. Dia. 1 1/2 in. to 14 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 7 ga.		
			10. Screen: Manufacturer's name Doerr Type Double-slot Dia. 16" Slot/gauze 1/8 Length 16' Set between 14 ft. and 30 ft. ft. and <input type="checkbox"/> ft. Gravel pack? yes Size range of material 3/8-200		
			11. Static water level: <input type="checkbox"/> mo./day/yr. 10 ft. below land surface Date 3-7-77		
			12. Pumping level below land surfaces: N/C <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade		
			15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
			16. Nearest source of possible contamination: FIELD ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Berkeley Pump Co. Model number B4JRBM HP 80 Volts -- Length of drop pipe 26' ea ft. capacity 1200 g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input checked="" type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
			(Use a second sheet if needed)		
18. Elevation:		19. Remarks: NOTE: Wells 1-3 are as above, well #4 has clay streaks at 14', 19' & 25', Well #5 has a clay streak at 10', 15' & 19', and Well #6 has clay streak at 13', 15', & 27'			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		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. Clarke Well & Equip., Inc. 185 Business name License No. Address Great Bend, KS 67530 Signed <i>[Signature]</i> Date 5-10-77 Authorized representative			

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

Form WWC-5