

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 <b>Rice</b>	Fraction <b>1/4 NE 1/4 SW 1/4</b>	Section number <b>14</b>	Township number <b>T 21 S R 10 E W</b>	Range number
2. Distance and direction from nearest town or city: <b>5 1/2 miles SW of Alden, KS</b> Street address of well location if in city:			3. Owner of well: <b>Jim Sleeper</b> R.R. or street: <b>Box 44</b> City, state, zip code: <b>Alden, KS 67512</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>9</b> in. Completion date <b>6-12-78</b> Well depth <b>30</b> ft.	
				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 type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
5. Type and color of material		From	To	9. Casing: Material <b>Styrene</b> Height <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>1.5</b> lbs./ft. Dia. <b>5</b> in. to <b>20</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>.200</b>	
Top soil		0	2	10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>Styrene 200</b> Dia. <b>5"</b> Slot gauge <b>1/8"</b> Length <b>10'</b> Set between <b>20</b> ft. and <b>30</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft.	
Sandy clay		2	10	Gravel pack? <b>Yes</b> Size range of material <b>3/8-200</b>	
Sand & gravel		10	30	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>3</b> ft. below land surface Date <b>6-12-78</b>	
				12. Pumping level below land surfaces: <b>Not Checked</b> <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"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade	
				15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.	
				16. Nearest source of possible contamination: <b>Field</b> ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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	
				(Use a second sheet if needed)	
18. Elevation:	19. Remarks:		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. <b>Clarke Well &amp; Eq., Inc. 185</b> Business name License No. Address <b>Great Bend KS 67530</b> Signed <b>[Signature]</b> Date <b>6-13-78</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

21  
 10  
 14  
 Sec  
 1/4  
 1/4  
 1/4

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

Form WWC-5