

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: <u>Stafford</u>	Fraction: <u>NE 1/4 NE 1/4 NE 1/4</u>	Section number: <u>9</u>	Township number: <u>T 21</u>	Range number: <u>S 12 E 12</u>
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>9 N 1/2 E, Hudson</u>			3. Owner of well: <u>Kennith Hewitt</u> R.R. or street: <u>Rt 2</u> City, state, zip code: <u>Stafford KS.</u>		
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <u>10</u> in. Completion date <u>4-30-76</u> Well depth <u>70</u> ft.
<u>sandy top soil</u>			<u>0</u>	<u>10</u>	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
<u>clay</u>			<u>10</u>	<u>16</u>	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
<u>fine sand</u>			<u>16</u>	<u>24</u>	9. Casing: Material <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>160</u> lbs./ft. Dia. <u>5</u> in. to <u>70</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>258</u>
<u>clay</u>			<u>24</u>	<u>25</u>	10. Screen: Manufacturer's name <u>R+B</u> Type <u>pvc</u> Dia. <u>5</u> Slot/gauge <u>1/16</u> Length <u>15</u> Set between <u>55</u> ft. and <u>70</u> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>2-3/4</u>
<u>fine sand</u>			<u>25</u>	<u>42</u>	11. Static water level: <u>25</u> ft. below land surface Date <u>7/30/76</u> mo./day/yr.
<u>clay</u>			<u>42</u>	<u>55</u>	12. Pumping level below land surfaces: <u>30</u> ft. after <u>1</u> hrs. pumping <u>40</u> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <u>80</u> g.p.m.
<u>sand + gravel clean</u>			<u>55</u>	<u>70</u>	13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>7/30/76</u> mo./day/yr.
<u>Hard clay</u>			<u>70</u>		14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade
					15. Well grouted? <input type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.
					16. Nearest source of possible contamination: ft. <u>300</u> Direction <u>NE</u> Type <u>septic tank</u> Well disinfected upon completion? <input 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
(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. <u>Rosenkrantz Lemis</u> Business name _____ License No. _____ Address <u>Quat Benton 134</u> Signed <u>Fredie Dodson</u> Date <u>8/24/76</u> Authorized representative		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

21
120
- 9 NE NE NE
1/4 1/4 1/4

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

Form WWC-5