

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>Stafford</b>	Fraction <b>NW 1/4 SW 1/4 SE 1/4</b>	Section number <b>31</b>	Township number <b>T 21 S</b>	Range number <b>R 13 E</b>				
2. Distance and direction from nearest town or city:  Street address of well location if in city: <b>Main Street in Seward, KS</b>			3. Owner of well: <b>Jim Brougher</b> R.R. or street: <b>Main Street</b> City, state, zip code: <b>Seward, KS 67577</b>						
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile W <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table> E S 1 Mile</div>			NW	NE	SW	SE	Sketch map: <div style="text-align: center;">X</div>		
NW	NE								
SW	SE								
5. Type and color of material			From	To	6. Bore hole dia. <b>5</b> in. Completion date <b>7-11-76</b> Well depth <b>850</b> ft.				
Top soil			0	3	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				
Brown & blue clay & sand streaks.			3	31	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				
Sand & gravel			31	50	9. Casing: Material <b>PVC</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 checked="" type="checkbox"/> Weight <b>.5</b> lbs./ft. Dia. <b>2</b> in. to <b>40</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>091</b>				
					10. Screen: Manufacturer's name <b>Peerless</b> <b>Plastics, Inc.</b> Type <b>PVC</b> Dia. <b>2"</b> Slot gauge <b>1/8</b> Length <b>10'</b> Set between <b>40</b> ft. and <b>50</b> ft. Gravel pack? <b>Yes</b> Size range of material <b>3/8-200</b>				
					11. Static water level: <b>11</b> ft. below land surface Date <b>7-11-76</b> mo./day/yr.				
					12. Pumping level below land surfaces: <b>N/C</b> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. 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: <b>12</b> inches above grade Pitless adapter				
					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>NONE KNOWN</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.</b> <b>185</b> Business name License No. Address <b>Great Bend, KS</b> Signed <b>[Signature]</b> Date <b>7-15-76</b> Authorized representative						
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley									

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

Form WWC-5