

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

Mass #1

1. Location of well: County <i>Stafford</i> Fraction <i>SW SE NE</i> 1/4 1/4 1/4 Section number <i>31</i> Township number <i>T 21 S</i> Range number <i>R 13 W</i>																
2. Distance and direction from nearest town or city: <i>1/2 north</i> <i>1/2 east</i> Street address of well location if in city: <i>Seward</i>																
3. Owner of well: <i>L. D. Drilling Co</i> R.R. or street: <i>Seward Bend Ks</i> City, state, zip code:																
4. Locate with "X" in section below: Sketch map: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <p>1 Mile</p> <p>1 Mile</p> </div> </div>																
5. Type and color of material																
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><i>Clay</i></td> <td style="text-align: center;"><i>0</i></td> <td style="text-align: center;"><i>15</i></td> </tr> <tr> <td style="text-align: center;"><i>Sandy Clay</i></td> <td style="text-align: center;"><i>15</i></td> <td style="text-align: center;"><i>30</i></td> </tr> <tr> <td style="text-align: center;"><i>Sand</i></td> <td style="text-align: center;"><i>30</i></td> <td style="text-align: center;"><i>50</i></td> </tr> <tr> <td style="text-align: center;"><i>Gravel</i></td> <td style="text-align: center;"><i>50</i></td> <td style="text-align: center;"><i>70</i></td> </tr> </tbody> </table>		From	To	<i>Clay</i>	<i>0</i>	<i>15</i>	<i>Sandy Clay</i>	<i>15</i>	<i>30</i>	<i>Sand</i>	<i>30</i>	<i>50</i>	<i>Gravel</i>	<i>50</i>	<i>70</i>
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6. Bore hole dia. <i>8</i> in. Completion date <i>Dec 27-77</i> Well depth <i>70</i> 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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other																
9. Casing: Material <i>Plastic</i> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>12</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <i>287.3</i> lbs./ft. Dia. <i>5</i> in. to <i>20</i> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <i>200</i>																
10. Screen: Manufacturer's name <i>Self-made</i> Type <i>RPC</i> Dia. <i>5</i> Gauge <i>8</i> Length <i>20</i> Set between <i>50</i> ft. and <i>70</i> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>1/8 - 1/4</i>																
11. Static water level: <i>12</i> ft. below land surface Date <i>12-27-77</i> mo./day/yr.																
12. 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.																
13. Water sample submitted: ____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____																
14. Well head completion: <input type="checkbox"/> Pitless adapter ____ Inches above grade																
15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.																
16. Nearest source of possible contamination: ft. ____ Direction ____ Type ____ 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: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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. <i>Mynor Water Well</i> Business name <i>L. D. Drilling Co</i> License No. <i>143</i> Address <i>Seward Bend Ks</i> Signed <i>A. Mynor</i> Date <i>12-27-77</i> Authorized representative																

21 L30 31 SW SE 1/4 1/4

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

Form WWC-5