

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 Stafford	Fraction se 1/4 se 1/4 ne 1/4	Section number 31	Township number T 21 S R 13	Range number EW
2. Distance and direction from nearest town or city: 500 ft. east of Seward, Kansas Street address of well location if in city:			3. Owner of well: Revis Roughton R.R. or street: route 4 City, state, zip code: Great Bend, Kansas 67530		
4. Locate with "X" in section below: Sketch map: N W E S 1 Mile			6. Bore hole dia. <u>29</u> in. Completion date _____ Well depth <u>121</u> ft. <u>8-4-76</u>		
			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 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		
5. Type and color of material			9. Casing: Material <u>steel</u> Height: Above or below _____ Threaded _____ Welded _____ Surface <u>18</u> in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>121</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <u>7</u>		
			10. Screen: Manufacturer's name _____ <u>Doerrs</u> Type <u>Steel</u> Dia. _____ Slot <u>xxxx 3/16</u> Length <u>40</u> Set between <u>81</u> ft. and <u>121</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 7/8</u>		
sandy top soil			From 0 To 3		
gray clay			From 3 To 17		
gray sandy clay			From 17 To 20		
gray clay			From 20 To 49		
sand & gravel			From 49 To 69		
gray clay			From 69 To 74		
sand & gravel clean coarse			From 74 To 130		
sand & gravel fine to med.			From 130 To 155		
			11. Static water level: _____ mo./day/yr. <u>8</u> ft. below land surface Date <u>5-25-76</u>		
			12. Pumping level below land surfaces: <u>26</u> ft. after <u>1</u> hrs. pumping <u>600</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>1400+</u> g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>5-25-76</u>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
			16. Nearest source of possible contamination: ft. <u>500</u> Direction <u>west</u> Type <u>septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: _____ Not installed Manufacturer's name <u>W.I.R.</u> Model number <u>1-12BH</u> HP <u>25</u> Volts <u>460</u> Length of drop pipe <u>60</u> ft. capacity <u>1000</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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>Rosencrantz-Bemis</u> <u>134</u> Business name License No. Address <u>Great Bend, Kansas 67530</u> Signed <u>S. Kilgore</u> Date <u>6-20-76</u> Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

21-130-31 SE SE NE 1/4 1/4 1/4

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

Form WWC-5