

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>1/4 C 1/4 NE 1/4</u>		Section number <u>6</u>		Township number T <u>21</u> S R <u>14</u> E <u>N</u>		Range number			
2. Distance and direction from nearest town or city: <u>5 1/2 mi. 1/4 W. into field from Radium, ks</u>				3. Owner of well: <u>Melvin Schartz-T.F. Dwyer</u>						R.R. or street: <u>3412 23rd St.</u>	
Street address of well location if in city:				City, state, zip code: <u>Great Bend, Ks. 67530</u>							
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile				Sketch map:		6. Bore hole dia. <u>29</u> in. Completion date <u>2-19-77</u>		Well depth <u>143</u> ft.			
						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			
						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				From		To		9. Casing: Material <u>steel</u> Height: Above or below			
Sandy Top Soil				0		1		Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in.			
Clay				1		13		RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft.			
Gravel				13		30		Dia. <u>16</u> in. to <u>143</u> ft. depth Wall Thickness: inches or			
Sand				30		43		Dia. _____ in. to _____ ft. depth gage No. <u>7</u>			
Clay				43		44		10. Screen: Manufacturer's name <u>Doerrs</u>			
Gravel				44		73		Type <u>steel</u> Dia. <u>16</u>			
Clay				73		102		Slot/gauge <u>3/16</u> Length <u>80</u>			
Gravel				102		104		Set between <u>63</u> ft. and <u>143</u> ft.			
Sand and Clay				104		115		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 3/8</u>			
Clay				115		117		11. Static water level: <u>11</u> ft. below land surface Date <u>11-10-76</u>			
Clay and Gravel				117		125		12. Pumping level below land surfaces: <u>10</u> ft. after <u>1</u> hrs. pumping <u>1000</u> g.p.m.			
Good Clean Sand Gravel				125		145		_____ ft. after _____ hrs. pumping _____ g.p.m.			
Hard Rock				145				Estimated maximum yield <u>1200</u> g.p.m.			
								13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>11-10-76</u>			
								14. Well head completion: _____ Pitless adapter _____ Inches above grade			
								15. Well grouted? <u>yes</u>			
								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>1400</u> Direction <u>NW</u> Type <u>corral</u>			
								Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
								17. Pump: _____ Not installed			
								Manufacturer's name <u>Western Land Roller</u>			
								Model number <u>3CM12</u> HP <u>40</u> Volts <u>460</u>			
								Length of drop pipe <u>60</u> ft. capacity <u>1200</u> g.p.m.			
								Type: _____ Submersible <input checked="" type="checkbox"/> Turbine			
								_____ Jet _____ Reciprocating			
								_____ Centrifugal _____ 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 134</u> Business name _____ License No. _____ Address <u>Great Bend, Ks.</u> Signed <u>Sandy Gilgore</u> Date <u>5-19-77</u> Authorized representative							
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley											

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

Form WWC-5