

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

County Pawnee		Fraction SE 1/4 NE 1/4 SE 1/4	Section number 32	Township number T 21	Range number S R 18	NW
1. Location of well:			3. Owner of well: Willis FAKEN			
2. Distance and direction from nearest town or city:			R.R. or street: R2			
Street address of well location if in city: Sanford, KS			City, state, zip code: Larned, KS			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>9</u> in. Completion date <u>11-30-76</u>		
<div style="text-align: center;">N</div> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">NW</div> <div style="text-align: center;">NE</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">SW</div> <div style="text-align: center;">SE X</div> </div> <div style="text-align: center;">S</div>				Well depth <u>182</u> ft.		
5. Type and color of material		From	To	7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug		
Top Soil - clay		0	35	<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
Sand		35	50	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry		
Sand-clay		50	70	<input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock		
Clay		70	120	<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Sand Rock		120	182	9. Casing: Material <u> </u> Height: <u>above</u> or below		
				Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in.		
				RMP <u> </u> PVC <input checked="" type="checkbox"/> Weight <u> </u> lbs./ft.		
				Dia. <u>5</u> in. to <u>182</u> ft. depth Wall Thickness: inches or		
				Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>SCH 40</u>		
				10. Screen: Manufacturer's name <u>MPI</u>		
				Type <u>PVC</u> Dia. <u>5"</u>		
				Slot/gauze <u>1/8"</u> Length <u>40'</u>		
				Set between <u>142</u> ft. and <u>182</u> ft.		
				<u> </u> ft. and <u> </u> ft.		
				Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-3/4"</u>		
				11. Static water level: <u> </u> mo./day/yr.		
				<u>44</u> ft. below land surface Date <u>11-30-76</u>		
				12. Pumping level below land surfaces:		
				<u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m.		
				<u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m.		
				Estimated maximum yield <u>50</u> g.p.m.		
				13. Water sample submitted: <u> </u> mo./day/yr.		
				<u> </u> Yes <input checked="" type="checkbox"/> No <u> </u> Date <u> </u>		
				14. Well head completion:		
				<u> </u> Pitless adapter <u>12</u> inches above grade		
				15. Well grouted? <u> </u>		
				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: <u>Fort</u>		
				ft. <u>90</u> Direction <u>W</u> Type <u>Storage</u>		
				Well disinfected upon completion? <u> </u> Yes <input checked="" type="checkbox"/> No		
				17. Pump:		
				<u> </u> Not installed		
				Manufacturer's name <u>Goulds</u>		
				Model number <u>UTM</u> HP <u>3</u> Volts <u>230</u>		
				Length of drop pipe <u>147</u> ft. capacity <u>40</u> g.p.m.		
				Type:		
				<input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine		
				<input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
				<input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography:				This well was drilled under my jurisdiction and this report		
<input type="checkbox"/> Hill				is true to the best of my knowledge and belief.		
<input type="checkbox"/> Slope				<u>Kelly S Water Well Ser 186</u>		
<input type="checkbox"/> Upland				Business name <u>R2 Great Bend, KS</u> License No. <u> </u>		
<input checked="" type="checkbox"/> Valley				Address <u>Kelly Davis</u> Date <u>12-20</u>		
				Signed <u>Kelly Davis</u> Authorized representative		

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

Form WWC-5

MI-1023