

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 <u>McPherson</u>		Fraction <u>SW 1/4 SE 1/4</u>		Section number <u>13</u>		Township number <u>T-21-</u>		Range number <u>R-2-W</u>						
1. Location of well: <u>McPherson</u>					2. Distance and direction from nearest town or city: <u>2 miles</u>					3. Owner of well: <u>LLOYD KOEHN</u> R.R. or street: <u>RR MOUND RIDGE KANSAS 6710</u> City, state, zip code:				
4. Locate with "X" in section below:					Sketch map:					6. Bore hole dia. <u>15"</u> in. Completion date <u>12-23-77</u> Well depth <u>47</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				
5. Type and color of material					From To					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				
<u>TOP SOIL</u>					<u>0</u> <u>5</u>					9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>24</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u> </u> lbs./ft. Dia. <u>4</u> in. to <u>37</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>1/4"</u>				
<u>VERY FINE SAND</u>					<u>5</u> <u>10</u>					10. Screen: Manufacturer's name <u>PEERLESS</u> Type <u>PVC</u> Dia. <u>4"</u> Slot/gauze <u>1/32"</u> Length <u>10</u> Set between <u>37</u> ft. and <u>47</u> ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material <u>8"</u>				
<u>PINK CLAY</u>					<u>10</u> <u>20</u>					11. Static water level: <u> </u> mo./day/yr. <u>15</u> ft. below land surface Date <u>12-23-77</u>				
<u>FINE SAND</u>					<u>20</u> <u>25</u>					12. Pumping level below land surfaces: <u>16</u> ft. after <u>15</u> hrs. pumping <u>12</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>15-20</u> g.p.m.				
<u>COURSE LIGHT BROWN SAND</u>					<u>25</u> <u>47</u>					13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>				
										14. Well head completion: <input type="checkbox"/> Pitless adapter <u>24</u> inches above grade				
										15. Well grouted? <u>YES</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>100</u> ft. Direction <u>EAST</u> Type <u>CATTLE</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
										17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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				
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>PETERSON IRR. 138-A</u> Business name License No. Address <u>Box 150 LINDBURG KS</u> Signed <u>Gary Rodine</u> Date <u>12-23-77</u> Authorized representative				

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

Form WWC-5