

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

HORSE THIEF CANYON NW

WATER WELL RECORD
KSA 82a-1201-1215

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

CCA

1. Location of well: County HODGEMAN		Fraction NE SW SW 1/4 1/4 1/4		Section number 34	Township number T 21 S	Range number R 26 E
X Distance and direction from nearest town or city: 15 MI WEST 6 MI NORTH FROM JETMORE Street address of well location if in city: 100				3. Owner of well: MARK SINCLAIR R.R. or street: City, state, zip code: JETMORE KANSAS 67854		
4. Locate with "X" in section below: Sketch map: N W E S 1 Mile				6. Bore hole dia. 8 in. Completion date 27 Well depth 48 ft. MAY 77		
				7. 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 checked="" 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 <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 24 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight 250 lbs./ft. Dia. 5 in. to 18 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 250		
				10. Screen: Manufacturer's name JTL Type RMP Dia. 51 Slot/gauze 1/16 Length 18 Set between 38 ft. and 48 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4		
BLACK TOPSOIL				11. Static water level: <input type="checkbox"/> mo./day/yr. 16 ft. below land surface Date MAY 27-77		
BROWN CLAY				12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 60-80 g.p.m.		
SAND FINE				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date		
GOOD SAND				14. Well head completion: <input type="checkbox"/> Pitless adapter 24 inches above grade		
TAN CLAY				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 12 ft.		
ROCK & SAND				16. Nearest source of possible contamination: ft. 30 Direction SOUTH type RAVINE Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
BLACK SHALE				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts Length of drop pipe 42 ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible 3" CYLINDER Turbine <input type="checkbox"/> Jet WINDMILL Reciprocating <input type="checkbox"/> Centrifugal <input checked="" type="checkbox"/> Other		
				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. DEAN WATERHOUSE PALE Business name MANSTON KANSAS License No. 243 Address MANSTON KANSAS Signed Dean Waterhouse Date 7-14 Authorized representative		
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Remarks: 2405 45 2360 1010				

21 26 E 34 Sec 34 N 21 S W 1/4 1/4 1/4

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

Form WWC-5