

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 <b>Rice</b>	Fraction <b>1/4 CNW 1/4 NE 1/4</b>	Section number <b>26</b>	Township number <b>T 21 S R 7</b>	Range number <b>E 7</b>
2. Distance and direction from nearest town or city: <b>8 miles East of Sterling, KS</b> Street address of well location if in city:			3. Owner of well: <b>Eugene Colle</b> R.R. or street: <b>Route 2</b> City, state, zip code: <b>Sterling, KS 67579</b>		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map:		6. Bore hole dia. <b>24</b> in. Completion date <b>3-25-77</b> Well depth <b>50</b> ft.	
		7. <input type="checkbox"/> Cable tool <input 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 checked="" 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	
		9. Casing: Material <b>steel</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>30.3</b> lbs./ft. Dia. <b>16</b> in. to <b>20</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>7 ga.</b>		10. Screen: Manufacturer's name <b>Doerr</b>	
		Type <b>Double-slot</b> Dia. <b>16"</b> Slot gauze <b>1/8</b> Length <b>30'</b> Set between <b>20</b> ft. and <b>50</b> ft. Gravel pack? <b>yes</b> Size range of material <b>3/8-200</b>		11. Static water level: <input type="checkbox"/> mo./day/yr. <b>11</b> ft. below land surface Date <b>3-3-77</b>	
		12. Pumping level below land surfaces: <b>N/C</b> ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.		13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
5. Type and color of material		From	To	14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade	
Top soil & gray clay		0	7	15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.	
Sand & gravel		7	38	16. Nearest source of possible contamination: <b>Field</b> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Brown clay		38	40	17. Pump: ____ Not installed Manufacturer's name <b>Berkeley</b> Model number <b>1001H-2</b> HP <b>20</b> Volts <b>460</b> Length of drop pipe <b>40</b> ft. capacity <b>450</b> 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	
Sand & gravel		40	50	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. <b>Clarke Well &amp; Eq., Inc. 185</b> Business name License No. _____ Address <b>Great Bend, KS 67530</b> Signed <b>D.W. Clarke</b> Date <b>4-8-77</b> Authorized representative	
18. Elevation:		19. Remarks:		21 - 7 E 26 NW NE	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)		Sec 1/4 1/4	

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

Form WWC-5