

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>CN 1/4 NE 1/4 SE 1/4</b>	Section number <b>17</b>	Township number <b>T 21 S</b>	Range number <b>S R 8 W E/W</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <b>Charles Carder</b> R.R. or street: <b>RFD</b> City, state, zip code: <b>Sterling, Kan. 67579</b>		
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <b>28</b> in. Completion date <b>5-2-77</b> Well depth <b>80</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		
5. Type and color of material			9. Casing: Material <b>Transite</b> Weight: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>30</b> lbs./ft. Dia. <b>16</b> in. to <b>42</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>3007/8</b>		
			10. Screen: Manufacturer's name <b>Johnson</b> Type <b>sawed</b> Dia. <b>16</b> Slot/gauze <b>3/16</b> Length <b>39</b> Set between <b>39</b> ft. and <b>42</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>yes</b> Size range of material <b>1/8-1/4</b>		
			11. Static water level: <input type="checkbox"/> mo./day/yr. <b>6'5"</b> ft. below land surface Date <input type="checkbox"/>		
			12. Pumping level below land surfaces: <b>43</b> ft. after <b>1</b> hrs. pumping <b>1400</b> g.p.m. <b>27</b> ft. after <b>1</b> hrs. pumping <b>1000</b> g.p.m. Estimated maximum yield <b>1400</b> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
			15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
			16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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		
(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. <b>Darling Drilling Co. 189</b> Business name License No. Address <b>125 W. 4th, Hutchinson, Ks.</b> Signed <b>Donald J. Duff 500</b> Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

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17  
CN 1/4 NE 1/4 SE

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

Form WWC-5