

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	Fraction	Section number	Township number	Range number
		1/4 1/4 SE 1/4	15	T 21 S R 8	EW
2. Distance and direction from nearest town or city: Street address of well location if in city:		3. Owner of well: R.R. or street: City, state, zip code:			
Rice Sterling 1/2 N 1/4 west in field		John Engelland R.R. Sterling, Kansas 67579			
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 1/4 Sterling 1/2 1/4		X Bore hole dia. 29 in. Completion date 5/21/79 Well depth 75 ft. 7. Cable tool ___ Rotary ___ Driven ___ Dug ___ Hollow rod ___ Jetted ___ Bored X Reverse rotary 8. Use: ___ Domestic ___ Public supply ___ Industry X Irrigation ___ Air conditioning ___ Stock ___ Lawn ___ Oil field water ___ Other 9. Casing: Material Transite Height: Above or below Threaded ___ Welded ___ Surface 8 in. RMP ___ PVC ___ Weight 30 lbs./ft. Dia 16 in. to 0 ft. depth Well Thickness: inches or Dia. 16 in. to 36 ft. depth No. 7	
5. Type and color of material		From	To		
Top soil		0	3	10. Screen: Manufacturer's name Johnson Sawed Type Sawed Dia. 1 1/2" Slot/gauze 3/16 Length 39" Set between 36 ft. and 75 ft. Gravel pack? yes Size range of material 1/8 x 1/4	
Clay		3	8	11. Static water level: mo./day/yr. 8 ft. below land surface Date 5-21-79	
Med. sand		8	43	12. Pumping level below land surfaces: 20 ft. after 1 hrs. pumping 800 g.p.m. 30 ft. after 2 hrs. pumping 1400 g.p.m. Estimated maximum yield 2000 g.p.m.	
Med. sand & clay break		43	45	13. Water sample submitted: mo./day/yr. ___ Yes ___ X No Date	
Med. fine sand		45	75	14. Well head completion: ___ Pitless adapter 8 Inches above grade	
				15. Well grouted? yes With: ___ Neat cement ___ Bentonite X Concrete Depth: From 0 ft. to 10 ft.	
				16. Nearest source of possible contamination: ft. ___ Direction ___ Type ___ Well disinfected upon completion? ___ Yes X No	
				17. Pump: ___ Not installed Manufacturer's name Western Land Roller Model number 4545 WCH 8063 Volts ___ Length of drop pipe 50 ft. capacity 900 g.p.m. Type: ___ Submersible X Turbine ___ Jet ___ Reciprocating ___ Centrifugal ___ 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. Rosencrantz-Bemis Ent. Inc. 131 Business name License No. ___ Address 1211 W. 4th, Hutchinson, Ks Signed Mike Rowen Date 6-8-79 Authorized representative		
Topography: / Hill - Slope - Upland - Valley					

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

Form WWC-5