

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

<input checked="" type="checkbox"/> Location of well:	County <u>Rice</u>	Fraction <u>SW 1/4 SW 1/4 SW 1/4</u>	Section number <u>2</u>	Township number T <u>21</u> S	Range number R <u>9</u> W
<input checked="" type="checkbox"/> Distance and direction from nearest town or city:	<u>1/2 E. Raymond</u>		3. Owner of well: <u>Allen Drilling Co.</u>		
Street address of well location if in city:	<u>Ks.</u>		R.R. or street: <u>Box 1389</u>		
			City, state, zip code: <u>Great Bend, KS</u>		
4. Locate with "X" in section below:			Sketch map:		
<p>A 36-section grid map with 'X' in the SW section. The grid is labeled with N, S, E, W and NW, NE, SW, SE. A scale bar indicates 1 mile.</p>			6. Bore hole dia. <u>8</u> in. Completion date <u>1-11-77</u> Well depth <u>50</u> ft.		
			7. <input 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		
			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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material <input type="checkbox"/> Height: <input checked="" type="checkbox"/> Above <input type="checkbox"/> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>50</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>sch 40</u>		
5. Type and color of material			From	To	10. Screen: Manufacturer's name <u>MPI</u>
<u>Top Soil - Clay</u>			<u>0</u>	<u>20</u>	Type <u>PVC</u> Dia. <u>5"</u>
<u>Sand - Gravel</u>			<u>20</u>	<u>50</u>	Slot/gauze <u>1/8"</u> Length <u>20'</u>
					Set between <u>30</u> ft. and <u>50'</u> ft.
					Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-3/4"</u>
					11. Static water level: <u>12</u> ft. below land surface Date <u>1-11-77</u>
					12. Pumping level below land surfaces: <u>    </u> ft. after <u>    </u> hrs. pumping <u>    </u> g.p.m. <u>    </u> ft. after <u>    </u> hrs. pumping <u>    </u> g.p.m. Estimated maximum yield <u>40</u> g.p.m.
					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>12</u> Inches above grade
					<input checked="" type="checkbox"/> Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.
					16. Nearest source of possible contamination: ft. <u>100</u> Direction <u>S</u> Type <u>oil test</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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
(Use a second sheet if needed)					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>184</u> <u>Kelly's Water Well Ser</u> Business name <u>RL Great Bend KS</u> License No. <u>    </u> Address <u>    </u> Signed <u>Kelly Price</u> Date <u>2-20</u> Authorized representative
18. Elevation:	19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

T 21 S 9 W  
 Sec 2  
 1/4 1/4 1/4

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

Form WWC-5