

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

Howards

Hanno #1 **BAD**

1. Location of well: County <i>Hodgman</i>		Fraction <i>SE 1/4 NE 1/4 NW 1/4</i>		Section number <i>26</i>	Township number <i>T 22 S</i>	Range number <i>R 22 W E/W</i>
2. Distance and direction from nearest town or city: <i>1/4 south</i>				3. Owner of well: <i>B+N Drilling Co</i>		
Street address of well location if in city: <i>Hannston</i>				R.R. or street: <i>Independence</i>		
City, state, zip code: <i>Independence Mo</i>						
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <i>8</i> in. Completion date <i>7-12-77</i>		
N		N		Well depth <i>60</i> ft.		
W		E		7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug		
S		S		<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
1 Mile		1 Mile		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 <i>Plastic</i> Height Above or below		
				Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>92</i> in.		
				RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <i>287.3</i> lbs./ft.		
				Dia. <i>5</i> in. to <i>60</i> ft. depth; Wall Thickness: inches or		
				Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth; gage No. <i>300</i>		
5. Type and color of material		From	To	10. Screen: Manufacturer's name <i>Self made</i>		
<i>Clay</i>		<i>0</i>	<i>20</i>	Type <i>OPK</i> Dia. <i>5</i>		
<i>Sand</i>		<i>20</i>	<i>40</i>	Slot/gauze <i>5/8</i> Length <i>20</i>		
<i>Gravel</i>		<i>40</i>	<i>60</i>	Set between <i>40</i> ft. and <i>60</i> ft.		
				Gravel pack? <i>yes</i> Size range of material <i>5-4</i>		
<i>BRICK 60'</i>				11. Static water level: <i>20</i> ft. below land surface Date <i>7-12-77</i>		
<i>20</i>				12. Pumping level below land surfaces:		
<i>40' sand thick</i>				____ ft. after ____ hrs. pumping ____ g.p.m.		
				____ ft. after ____ hrs. pumping ____ g.p.m.		
				Estimated maximum yield ____ g.p.m.		
<i>in Alluvium</i>				13. Water sample submitted: <i>no./day/yr.</i>		
				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
				14. Well head completion:		
				____ Pitless adapter _____ inches above grade		
				15. Well grouted? <i>yes</i>		
				With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete		
				Depth: From <i>0</i> ft. to <i>10</i> ft.		
				16. Nearest source of possible contamination:		
				ft. _____ Direction _____ Type _____		
				Well disinfected upon completion? Yes <input type="checkbox"/> No <input type="checkbox"/>		
				17. Pump: <input checked="" type="checkbox"/> Not installed		
				Manufacturer's name _____		
				Model number _____ HP _____ Volts _____		
				Length of drop pipe _____ ft. capacity _____ 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.		
				<i>Myers Water Well</i>		
				Business name _____ License No. _____		
				Address <i>St Bend Mo</i>		
				Signed <i>R Myers</i> Date <i>7-12-77</i>		
				Authorized representative		
18. Elevation:		19. Remarks:				
Topography:		<i>5155</i>				
<input type="checkbox"/> Hill		<i>60</i>				
<input checked="" type="checkbox"/> Slope		<i>1695</i>				
<input type="checkbox"/> Upland						
<input type="checkbox"/> Valley						
		<i>TOPO</i>				

T 22 S R 22 W Sec 26 SE NE NW 1/4 1/4 1/4

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

Form WWC-5