

USE TYPEWRITER OR BALL POINT PEN. PRESS FIRMLY, PRINT CLEARLY.

HANSTON  
KS  
ADC

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>HODGEMAN</b>		Fraction <b>SW 1/4 SE NE 1/4</b>		Section number <b>33</b>	Township number <b>T 22 S</b>	Range number <b>R 22 E</b>
2. Distance and direction from nearest town or city: <b>1 1/2 S 1 W</b> Street address of well location if in city: <b>1/2 S of Hanst</b>				3. Owner of well: <b>CURE INC</b> R.R. or street: City, state, zip code: <b>HANSTON KANSAS</b>		
4. Locate with "X" in section below: Sketch map: N W E S 1 Mile				6. Bore hole dia. <b>28</b> in. Completion date: <b>20 July 76</b> Well depth <b>65</b> ft.		
5. Type and color of material				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		
From To				9. Casing: Material _____ Height: Above or below Threaded <input checked="" type="checkbox"/> Welded _____ Surface <b>12</b> in. RMP: <b>FIBERGLASS</b> Weight _____ lbs./ft. Dia. <b>16</b> in. to _____ ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
				10. Screen: Manufacturer's name <b>BURGESS</b> <b>WELL CO. MINNAPOLIS</b> Type <b>FIBERGLASS</b> Dia. <b>16</b> Slot/gauze <b>3/16</b> Length <b>12 FT</b> Set between <b>53</b> ft. and <b>65</b> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/2 PIVAN</b>		
BLACK TOPSOIL				0	6	11. Static water level: _____ mo./day/yr. <b>39</b> ft. below land surface Date: <b>20 9-20 76</b>
BROWN CLAY				6	38	12. Pumping level below land surfaces: <b>200</b> ft. after <b>4</b> hrs. pumping _____ g.p.m. <b>63</b> ft. after <b>4</b> hrs. pumping <b>240</b> g.p.m. Estimated maximum yield <b>240</b> g.p.m.
FINE BLUE SAND				38	47	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____
DARK CLEAN SAND (TIGHT)				47	61	14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade
RAINBOW CLAY				61	65	15. Well grouted? <b>NO</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft.
BROCK 61" R.P.						16. Nearest source of possible contamination: ft. <b>460</b> Direction <b>NW</b> Type <b>CREEK</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>39</b> <b>72</b> sat thick						17. Pump: _____ Not installed Manufacturer's name <b>REDA</b> Model number <b>5 1/2 HP</b> <b>7 1/2</b> Volts <b>240</b> Length of drop pipe <b>57</b> ft. capacity <b>250</b> g.p.m. Type: <input checked="" 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. <b>243</b> <b>Dean Waterhaus &amp; PRLG</b> Business name _____ License No. _____ Address <b>HANSTON KANSAS</b> <b>Dean Waterhaus</b> Date <b>6-5-76</b> Authorized representative
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Remarks: <b>2165'</b> <b>61</b> <b>2104'</b> <b>TOPO</b>				

22 22 33  
1/4 1/4 1/4  
S W S E N E

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

Form WWC-5