

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 Harvey | Fraction NW 1/4 NW 1/4 NW 1/4 | Section number 29 | Township number T 23 S | Range number R 1W E |
| 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: | | | |
| From the Twin Bridges at Ridge Road & Hwy 50 | | | Weldon Koehn R#2 Box 133 Halstead, Kansas 67056 | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile | | | Sketch map: it is 2 West, 1/4 South on the East side of the road Sedgwick, Kansas | | | |
| 5. Type and color of material | | | From | To | 6. Bore hole dia. <u>11</u> in. Completion date <u>11-14-77</u> Well depth <u>120</u> ft. | |
| | | | | | 7. <input checked="" 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 type="checkbox"/> Reverse rotary | |
| | | | | | 8. Use: <input checked="" 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other | |
| | | | | | 9. Casing: Material <u>styrene</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>120</u> lbs./ft. Dia. <u>5</u> in. to <u>120</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>120</u> ft. depth gauge No. <u>200</u> | |
| | | | | | 10. Screen: Manufacturer's name <u>Sunflower Plastic</u> Type <u>styrene</u> Dia. <u>5"</u> Slot/gauge <u>.06</u> Length <u>30'</u> Set between <u>80</u> ft. and <u>100</u> ft. <u>110</u> ft. and <u>120</u> ft. Gravel pack? <u>yes</u> Size range of material <u>1/4-1/8"</u> | |
| | | | | | 11. Static water level: <u>25</u> ft. below land surface Date <u>11-14-77</u> | |
| | | | | | 12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m. | |
| | | | | | 13. Water sample submitted: ____ mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date ____ | |
| | | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade | |
| | | | | | 15. Well grouted? <u>yes</u> <u>1-2</u> fine sand mix With: <u>40</u> Neat cement <u>14</u> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From ____ ft. to ____ ft. | |
| | | | | | 16. Nearest source of possible contamination: <u>NONE</u> ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | 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) | | | |
| 18. Elevation: | | 19. Remarks: | | 20. Water well contractor's certification: | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | Flat Ground Septic System not installed at this time. No apparent source for contamination. | | This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Harp Well & Pump 236 Business name: <u>Wichita, Kanass</u> License No. ____ Address: <u>M. Arnold</u> Signed: <u>M. Arnold</u> Date <u>12-12-77</u> Authorized representative | | |