

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 <u>Pawnee</u>		* Fraction <u>C 1/4 NW 1/4 NE 1/4</u>		Section number <u>30</u>		Township number <u>T 23 S</u>		Range number <u>R 19 W</u>		E/W	
2. Distance and direction from nearest town or city: <u>Spafield south to Coline 2 north 1/2 west</u>				3. Owner of well: <u>Steeling Delg</u>		R.R. or street: <u>Box 129</u>		City, state, zip code: <u>Steeling KS, 67579</u>			
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. <u>7</u> in. Completion date <u>12-15-75</u>		Well depth <u>60</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"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Dia. <u>5</u> in. to <u>60</u> ft. depth		Height: Above or below <u>12</u> in. Surface <u>12</u> in. Weight <u>278-3</u> lbs./ft. Wall Thickness: inches or gage No. <u>200</u>			
				5. Type and color of material		10. Screen: Manufacturer's name <u>Caseless</u>		Type <u>Saw</u> Dia. <u>5</u>		Slot/gauze <u>1/4</u> Length <u>20</u>	
		From		To		11. Static water level: <u>20</u> ft. below land surface Date <u>12-15-75</u>		mo./day/yr.			
						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.					
						Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____					
						14. Well head completion: _____ Pitless adapter <u>12</u> inches above grade					
						15. Well grouted <u>yes</u>					
						With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete					
						Depth: From <u>0</u> ft. to <u>10</u> ft.					
						16. Nearest source of possible contamination: _____ ft. _____ Direction _____ Type <u>above</u>					
						Well disinfected upon completion? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
						17. Pump: _____ Not installed					
						Manufacturer's name _____					
						Model number _____ HP _____ Volts _____					
						Length of drop pipe _____ ft. capacity _____ g.p.m.					
						Type: _____ Submersible _____ Turbine					
						_____ Jet _____ Reciprocating					
						_____ Centrifugal _____ Other					
18. Elevation:		19. Remarks:				20. Water well contractor's certification:					
Topography: _____ Hill _____ Slope _____ Upland _____ Valley						This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.					
						<u>Mueks Water Well 143</u> Business name License No. _____					
						Address: <u>Great Bend KS</u>					
						Signed: <u>Thoyt Goodall</u> Date <u>12-15-75</u>					
						Authorized representative <u>1978</u>					

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

Form WWC-5

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 R 19 W
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 Sec 30
 C W N E
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