

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

County Pawnee		Fraction ne 1/4 nw 1/4 nw 1/4		Section number 5		Township number T 23		Range number S R 18W		E/W								
1. Location of well:				3. Owner of well: Eugene Tomlinson- R.R. or street: Rl Garfield, Ks. City, state, zip code:														
2. Distance and direction from nearest town or city: Street address of well location if in city: 4 1/4 W Garfield, Ks.																		
4. Locate with "X" in section below: <div style="text-align:center;">N <table border="1" style="margin:auto; width:150px;"><tr><td>X</td><td>I</td></tr><tr><td>NW</td><td>NE</td></tr><tr><td>S</td><td>E</td></tr><tr><td>SW</td><td>SE</td></tr></table> S E W 1 Mile</div>				X	I	NW	NE	S	E	SW	SE	Sketch map:			6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>145</u> ft. <u>4-13-78</u>			
X	I																	
NW	NE																	
S	E																	
SW	SE																	
<div style="display:none;"></div>				7. Cable tool <input checked="" type="checkbox"/> Rotary ___ Driven ___ Dug ___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary ___														
				8. Use: <input checked="" type="checkbox"/> Domestic ___ Public supply ___ Industry ___ Irrigation ___ Air conditioning ___ Stock ___ Lawn ___ Oil field water ___ Other ___														
				9. Casing: Material ___ Height: Above ground <u>3</u> ft. Threaded ___ Welded ___ Surface <u>12</u> in. RMP ___ PVC <input checked="" type="checkbox"/> Weight <u>2.8</u> lbs./ft. Dia. <u>5</u> in. to <u>145</u> ft. depth Wall Thickness: inches or Dia. ___ in. to ___ ft. depth gage No. <u>sche 40</u>														
				10. Screen: Manufacturer's name <u>Jetstream</u> Type <u>DVC</u> Dia. <u>5"</u> Slot/gauze <u>1/32"</u> Length <u>20'</u> Set between <u>125</u> ft. and <u>145</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material: <u>1/8-3/4"</u>														
				11. Static water level: _____ mo./day/yr. <u>62</u> ft. below land surface Date <u>4-13-78</u>														
<div style="display:none;"></div>				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>25</u> g.p.m.														
				13. Water sample submitted: _____ mo./doz/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____														
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ Inches above grade														
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement ___ Bentonite ___ Concrete ___ Depth: From _____ ft. to <u>14</u> ft.														
				16. Nearest source of possible contamination: ft. <u>75</u> Direction <u>nw</u> Type <u>sewer</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ___ No ___														
<div style="display:none;"></div>				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: ___ Submersible ___ Turbine ___ Jet ___ Reciprocating ___ Centrifugal ___ Other														
				(Use a second sheet if needed)														
18. Elevation:		19. Remarks:		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. Kellys Waterwell Ser 186 Business name License No. _____ Address R2 Great Bend, Ks. Signed <u>Kelly Price</u> Date <u>2-22-79</u> Authorized Representative														
Topography: ___ Hill ___ Slope <input checked="" type="checkbox"/> Upland ___ Valley																		

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

Form WWC-5