

USE TYPEWRITER OR BALL
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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: <i>NE 1/4 SW 1/4 NE 1/4</i>	County <i>Pawnee</i>	Fraction <i>NE 1/4 SW 1/4 NE 1/4</i>	Section number <i>32</i>	Township number <i>T 23 S</i>	Range number <i>R 18 E/W</i>
2. Distance and direction from nearest town or city: <i>4 1/4 SW on 56 Hwy from</i> Street address of well location if in city: <i>Gayfield, KS.</i>			3. Owner of well: <i>Alan Converse</i> R.R. or street: City, state, zip code: <i>Gayfield, KS 67529</i>		
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile			Sketch map: 6. Bore hole dia. <i>2 1/2</i> in. Completion date _____ Well depth <i>37</i> 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 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 9. Casing: Material <i>Steel</i> Height: Above or below _____ Threaded _____ Welded _____ Surface <i>2 1/2</i> in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. <i>1 1/2</i> in. to <i>3 1/2</i> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <i>7</i>		
5. Type and color of material			From	To	
<i>Top soil</i>			<i>0</i>	<i>2</i>	10. Screen: Manufacturer's name <i>Super</i> Type <i>steel</i> Dia. _____ Slot/gage <i>3/16</i> Length <i>12</i> Set between <i>25</i> ft. and <i>37</i> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>12 3/4</i>
<i>Brown clay</i>			<i>2</i>	<i>5</i>	11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____
<i>Sand & gravel clean coarse loose</i>			<i>5</i>	<i>35 1/2</i>	12. Pumping level below land surfaces: <i>25</i> ft. after <i>1</i> hrs. pumping <i>362</i> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>425</i> g.p.m.
<i>Yellow brown gray clay</i>			<i>35 1/2</i>	<i>40</i>	13. Water sample submitted: _____ mo./day/yr. Yes _____ No _____ Date _____
					14. Well head completion: _____ Pitless adapter _____ inches above grade
					15. Well grouted? <input checked="" type="checkbox"/> With <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <i>0</i> ft. to <i>10</i> ft.
					16. Nearest source of possible contamination: ft. <i>1600</i> Direction <i>North</i> Type <i>septic</i> Well disinfected upon completion? <i>Yes</i> Yes _____ 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: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____
(Use a second sheet if needed)					
18. Elevation: Topography: _____ Hill _____ Slope <input checked="" type="checkbox"/> Upland _____ Valley	19. Remarks: <i>No Street #5.</i>		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>Brockway-Bemis 134</i> Business name _____ License No. _____ Address <i>Spout Bend, KS 66529</i> Signed <i>Samuel R. Brockway</i> Date _____ Authorized Representative		

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

Form WWC-5