

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>1/4 C 1/4 SE 1/4</u>	Section number <u>35</u>	Township number <u>T 23 S</u>	Range number <u>R 18 E/W</u>
2. Distance and direction from nearest town or city: <u>4 mi. N. of Greensburg. From main hwy</u> Street address of well location if in city: <u>4 N. 3/4 W. into field</u>			3. Owner of well <u>Edward Bender</u> R.R. or street: <u>316 East Grant</u> City, state, zip code: <u>Greensburg, Ks. 67054</u>		
4. Locate with "X" in section below: <div style="text-align: center;"> </div> Sketch map:			6. Bore hole dia. <u>29</u> in. Completion date _____ Well depth <u>99</u> ft. <u>2-22-77</u>		
5. Type and color of material			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 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 <u>steel</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>99</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>7</u>		
			10. Screen: Manufacturer's name _____ <u>Doerrs</u> Type <u>steel</u> Dia. <u>16</u> Slot/gauge <u>3/16</u> Length <u>40</u> Set between <u>60</u> ft. and <u>99</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 3/8</u>		
Top Soil Sandy			From	To	11. Static water level: <u>18</u> ft. below land surface Date <u>10-7-76</u> mo./day/yr.
Brown Clay			0	2	12. Pumping level below land surfaces: <u>6</u> ft. after <u>1</u> hrs. pumping <u>800</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>1000</u> g.p.m.
Brown & Yellow Clay			2	8	13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>10-7-76</u>
Gray & White Clay			8	12	14. Well head completion: _____ Pitless adapter _____ Inches above grade
Brown & Yellow Clay			12	16	15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From _____ ft. to <u>10</u> ft.
Sand & Gravel			16	19 1/2	16. Nearest source of possible contamination: ft. <u>2</u> Direction <u>W</u> Type <u>Coelal</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Brown Clay			19 1/2	74	17. Pump: _____ Not installed Manufacturer's name <u>Western Land Roller</u> Model number <u>4 KB 12</u> HP <u>100</u> Volts _____ Length of drop pipe <u>70</u> ft. capacity <u>1000</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
Sand & Gravel			74	76	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. <u>Rosenkrantz-Bemis</u> <u>134</u> License No. Business name <u>Great Bend, Ks.</u> Address _____ Signed <u>Aradia Dorson</u> Date <u>3/2/77</u> Authorized representative
Clay Dark Blue			76	89	
			89	95	
(Use a second sheet if needed)					
18. Elevation: <u>2110</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>29103 (NOX)</u>				

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

Farm WWC-5