

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 <b>Reno</b>	Fraction <b>NW 1/4 SW 1/4 NE 1/4</b>	Section number <b>4</b>	Township number <b>T 23 S</b>	Range number <b>R 5 E</b>
2. Distance and direction from nearest town or city: <b>2710 Syler Dr.</b> Street address of well location if in city: <b>Hutchinson Kan.</b>				3. Owner of well: <b>Robert Hayes</b> R.R. or street: <b>Syler Drive</b> City, state, zip code: <b>Hutchinson, Kan 67501</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>9</b> in. Completion date <b>12-28-76</b> Well depth <b>130</b> ft.		
				7. 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 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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
				9. Casing: Material <b>Plas</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <b>Glue</b> Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> <b>MM</b> PVC <input checked="" type="checkbox"/> Weight <b>12</b> lbs./ft. Dia. <b>6</b> in. to <b>50</b> ft. depth Wall Thickness: inches or Dia. <b>1</b> in. to <b>30</b> ft. depth gage No. <b>330</b>		
5. Type and color of material				From	To	10. Screen: Manufacturer's name <b>NONE</b>
<b>Sandy soil</b>				<b>0</b>	<b>5</b>	Type <b>_____</b> Dia. <b>_____</b>
<b>fine sand</b>				<b>5</b>	<b>12</b>	Slot/gauze <b>_____</b> Length <b>_____</b>
<b>Sandy clay</b>				<b>12</b>	<b>30</b>	Set between <b>_____</b> ft. and <b>_____</b> ft.
<b>brown &amp; grey clay</b>				<b>30</b>	<b>42</b>	<b>_____</b> ft. and <b>_____</b> ft.
<b>red &amp; gray shale</b>				<b>42</b>	<b>130</b>	Gravel pack? <b>NO</b> Size range of material <b>_____</b>
						11. Static water level: <b>65</b> ft. below land surface Date <b>11-3-76</b> mo./day/yr
						12. Pumping level below land surfaces: <b>90</b> ft. after <b>2</b> hrs. pumping <b>10</b> g.p.m. <b>_____</b> ft. after <b>_____</b> hrs. pumping <b>_____</b> g.p.m. Estimated maximum yield <b>10</b> g.p.m.
						13. Water sample submitted: <b>_____</b> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <b>_____</b>
						14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> inches above grade
						15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>3</b> ft. to <b>13</b> ft.
						16. Nearest source of possible contamination: ft. <b>70</b> Direction <b>SW</b> Type <b>Septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. Pump: <b>Not installed</b> Manufacturer's name <b>STA-RITE</b> Model number <b>Ser 8</b> HP <b>1/2</b> Volts <b>230</b> Length of drop pipe <b>100</b> ft. capacity <b>12</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		<b>Set 50' 6" casing with 80' 5" open hole below casing in shale</b>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>Price Water Well 193</b> Business name <b>RR3 Hutchinson</b> License No. <b>_____</b> Address <b>John Davenport</b> Date <b>5-23-77</b> Signed <b>John Davenport</b> Authorized representative		

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

Form WWC-5