

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82g-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well: County Reno		Fraction SE 1/4 NW 1/4 NE 1/4		Section number 4	Township number T 23-N	Range number S R 6W E/W				
2. Distance and direction from nearest town or city:				3. Owner of well: Elmer Smith						
Street address of well location if in city: 2708 Wildrose				R.R. or street: RR #1						
				City, state, zip code: Nickerson Kansas						
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile W <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 50px; height: 50px; text-align: center;">NW</td><td style="width: 50px; height: 50px; text-align: center;">X NE</td></tr><tr><td style="width: 50px; height: 50px; text-align: center;">SW</td><td style="width: 50px; height: 50px; text-align: center;">SE</td></tr></table> E S 1 Mile</div>				NW	X NE	SW	SE	Sketch map:		
NW	X NE									
SW	SE									
5. Type and color of material				From	To					
				top soil		0'	3'			
				grey clay		3'	5'			
				dry fine gravel		5'	7'			
				river gravel		7'	44'			
				1/8 to 1/2" dia						
6. Bore hole dia. 9" in. Completion date 9-5-75				Well depth 44' ft.						
7. <input 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 checked="" 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 type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other						
9. Casing: Material _____				Height: Above or below _____						
Threaded _____ Welded _____				Surface 12 in.						
RMP <input checked="" type="checkbox"/> PVC _____				Weight _____ lbs./ft.						
Dia. 6 in. to 34 ft. depth				Wall Thickness: inches or _____						
Dia. _____ in. to _____ ft. depth				gauge No. 125						
10. Screen: Manufacturer's name J & L										
Type 100 Dia. 6"										
Slot/gauze 1/8" Length 10'										
Set between 34 ft. and 44 ft.										
				ft. and _____ ft.						
Gravel pack? NO Size range of material _____										
11. Static water level: _____ mo./day/yr.				Date 9-5-75						
7 ft. below land surface										
12. Pumping level below land surfaces:										
7 1/2 ft. after 24 hrs. pumping 15 g.p.m.										
_____ ft. after _____ hrs. pumping _____ g.p.m.										
Estimated maximum yield 100 g.p.m.										
13. Water sample submitted: _____ mo./day/yr.										
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____										
14. Well head completion: _____										
<input type="checkbox"/> Pitless adapter 12 inches above grade										
15. Well grouted? yes										
With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete										
Depth: From 0 ft. to 7 ft.										
16. Nearest source of possible contamination: _____										
ft. 60 Direction East Type Septic										
Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: _____										
<input 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: _____						
Topography: _____										
<input type="checkbox"/> Hill										
<input type="checkbox"/> Slope										
<input type="checkbox"/> Upland										
<input checked="" type="checkbox"/> Valley										
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.										
Price Water Well 193										
Business name RR #3 Hutchinson License No. _____										
Address _____										
Signed John Davenport Date 11-28-										
Authorized representative										

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

Form WWC-5