

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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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

Earline #1

1. Location of well:	County: <i>Stafford</i>	Fraction: <i>C 1/4 NE 1/4 NE 1/4</i>	Section number: <i>31</i>	Township number: <i>T 24 S</i>	Range number: <i>R 14 W E/W</i>
2. Distance and direction from nearest town or city: <i>3 South</i> Street address of well location if in city: <i>West Dillwin</i>			3. Owner of well: <i>Sterling Drilling Co</i> R.R. or street: <i>Sterling</i> City, state, zip code: <i>Kansas</i>		
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 6. Bore hole dia. <i>8</i> in. Completion date Well depth <i>80</i> ft. <i>3-15-76</i>		
5. Type and color of material			7. ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
			8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☒ Oil field water ☐ Other		
			9. Casing: Material <i>Plastic</i> Height: <i>Above</i> or below Threaded ☐ Welded ☒ Surface <i>12</i> in. RMP ☐ PVC ☒ Weight <i>224</i> lbs/ft. Dia. ☐ in. to ☐ ft. depth Wall thickness: inches or Dia. ☐ in. to ☐ ft. depth gauge No. <i>200</i>		
			10. Screen: Manufacturer's name <i>Earline Plastic</i> Type <i>PVC</i> Dia. <i>5</i> Slot gauge <i>1/8</i> Length <i>20</i> Set between <i>80</i> ft. and <i>80</i> ft. Gravel pack? <i>yes</i> Size range of material <i>1/4 - 1/2</i>		
			11. Static water level: <i>16</i> ft. below land surface Date <i>3-15-76</i> mo./day/yr.		
(Use a second sheet if needed)			12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.		
			13. Water sample submitted: ____ mo./day/yr. Yes ☐ No ☐ Date ____		
			14. Well head completion: ☐ Pitless adapter ____ inches above grade		
			15. Well grouted? <i>yes</i> With: ☒ Neat cement ☐ Bentonite ☐ Concrete Depth: From <i>0</i> ft. to <i>12</i> ft.		
			16. Nearest source of possible contamination: ft. ____ Direction ____ Type ____ Well disinfected upon completion? Yes ☐ No ☐		
			17. Pump: ☒ 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		
			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>Myers Water Well 146</i> Business name License No. <i>146</i> Address <i>Great Bend KS</i> Signed <i>Arford Myers</i> Date <i>3-1</i> Authorized representative		
			18. Elevation:		
			19. Remarks:		
			Topography: ☐ Hill ☒ Slope ☐ Upland ☐ Valley		

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

Form WWC-5