

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 EDWARDS	Fraction C 1/4 SW 1/4 NW 1/4	Section number 33	Township number T 24 S	Range number R 16 W
2. Distance and direction from nearest town or city: 1 1/4 South 150 Hwy EASTSIDE			3. Owner of well: STERLING STEELING CO R.R. or street: BOX 1129 City, state, zip code: STERLING MO 64579			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. 9 in. Completion date 4-4-79 Well depth 75 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	
5. Type and color of material					8. Use: <input 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 checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other	
					9. Casing: Material <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 278-3 lbs./ft. Dia. 5 in. to 75 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 265	
					10. Screen: Manufacturer's name JET STREAM Type SAW Dia. 5" Slot 1/8" Length 20 Set between 55 ft. and 75 ft. Gravel pack? yes Size range of material 1/8-1/4	
					11. Static water level: 25 ft. below land surface Date 4-4-79 mo./day/yr.	
					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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____	
					14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> 10 Inches above grade	
					15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.	
					16. Nearest source of possible contamination: ft. ____ Direction ____ Type pond Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Valts ____ 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	
					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 Myersdale Well Service Business name License No. 143 Address Great Bend Mo Signed Charles C. Myers Date 4-3-79 Authorized representative	
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 24
 R 16 W
 E 33
 Sec 33
 1/4 1/4 1/4
 CSW 10 NW

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

Form WWC-5