

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

Meals #1

1. Location of well:	County <u>Colwardo</u>	Fraction <u>SE 1/4 SE 1/4 SE 1/4</u>	Section number <u>2</u>	Township number <u>T 24 S</u>	Range number <u>R 17 W E/W</u>															
2. Distance and direction from nearest town or city: <u>2 north</u> <u>3 west</u>			3. Owner of well: <u>Stirling Drilling</u> R.R. or street: <u>Stirling Kansas</u> City, state, zip code:																	
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map:																	
			6. Bore hole dia. <u>8</u> in. Completion date <u>9-24-77</u> Well depth <u>70</u> 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 <u>Plastic</u> Height: <u>5</u> above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>287.3</u> lbs./ft. Dia. <u>8</u> in. to <u>70</u> ft. depth; Wall Thickness: inches or Dia. <u>8</u> in. to <u>70</u> ft. depth; gage No. <u>200</u>																	
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><u>Clay</u></td> <td><u>0</u></td> <td><u>10</u></td> </tr> <tr> <td><u>Sandy clay</u></td> <td><u>10</u></td> <td><u>30</u></td> </tr> <tr> <td><u>Sand</u></td> <td><u>30</u></td> <td><u>30</u></td> </tr> <tr> <td><u>Gravel</u></td> <td><u>50</u></td> <td><u>70</u></td> </tr> </tbody> </table>				From	To	<u>Clay</u>	<u>0</u>	<u>10</u>	<u>Sandy clay</u>	<u>10</u>	<u>30</u>	<u>Sand</u>	<u>30</u>	<u>30</u>	<u>Gravel</u>	<u>50</u>	<u>70</u>	10. Screen: Manufacturer's name <u>Self made</u> Type <u>PVC</u> Dia. <u>3</u> Sig gauze <u>1/2</u> Length <u>20</u> Set between <u>50</u> ft. and <u>70</u> ft. ft. and <u>70</u> ft. Gravel pack? <u>Yes</u> size range of material <u>1/8 - 1/4</u>		
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			11. Static water level: <u>17</u> ft. below land surface Date <u>9-24-77</u> 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 ____ inches above grade																	
			15. Well grouted? <u>Yes</u> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.																	
			16. Nearest source of possible contamination: ft. ____ Direction ____ Type ____ 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 ____ 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																	
			(Use a second sheet if needed)																	
18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:		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>Myers Water Well</u> Business name <u>St Bend Ks</u> License No. <u>143</u> Address <u>St Bend Ks</u> Signed <u>A Myers</u> Date <u>9-24-77</u> Authorized representative																	

24 17 W E
 2 SE SE SE
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5