

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

carpenter 1-5

1. Location of well: County <u>Edwards</u> <u>Lanvale</u>		Fraction <u>NE 1/4 SW 1/4 SE 1/4</u>	Section number <u>5</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>Larned KS, 12</u> <u>South to Edward Co Line 1 m.</u> Street address of well location if in city: <u>South 6 1/2 East Northside</u>			3. Owner of well: <u>Steeling Delq</u> R.R. or street: <u>129</u> City, state, zip code: <u>Steeling Kansas 67579</u>		
4. Locate with "X" in section below: <u>WEST</u> Sketch map:			6. Bore hole dia. <u>7</u> in. Completion date <u>9-22-78</u> Well depth <u>60</u> ft.		
5. Type and color of material			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		
			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		
			<input checked="" type="checkbox"/> Casing: Material _____ Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>278-3</u> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: _____ Dia. _____ in. to _____ ft. depth Gauge No. <u>200-265</u>		
			10. Screen: Manufacturer's name _____ <u>Peckles</u> Type <u>Sand</u> Dia. <u>5</u> Slot/gauze <u>1/8</u> Length <u>20</u> Set between <u>40</u> ft. and <u>60</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>4-1/8</u>		
			11. Static water level: _____ mo./day/yr. <u>21</u> ft. below land surface Date <u>9-22-78</u>		
			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 <u>12</u> 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.		
			<input checked="" type="checkbox"/> Nearest source of possible contamination: ft. _____ Direction _____ Type <u>fuel</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: _____ 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: _____			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 143</u> Business name _____ License No. _____ Address <u>Great Bend KS</u> Signed <u>Floyd Rosendahl</u> Date <u>9-22</u> Authorized representative		
19. Remarks: _____					
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

24 17 W - 5 NE SUSE
T R E W Sec 1/4 1/4 1/4

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

Form WWC-5