

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

*Smith #1*

1. Location of well: County <u>Edwards</u>		Fraction <u>C W 1/2</u> 1/4 1/4 1/4		Section number <u>10</u>	Township number <u>T 24 S S</u>	Range number <u>R 17 W E/W</u>															
Distance and direction from nearest town or city: <u>2 N. - 4 W - 1/2 S.</u> Street address of well location if in city: <u>Belpre</u>				3. Owner of well: <u>Stirling Drilling Co</u> R.R. or street: <u>Stirling Kansas</u> City, state, zip code:																	
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. <u>8</u> in. Completion date <u>1-26-78</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																	
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td style="text-align:center;"><u>Clay</u></td> <td style="text-align:center;"><u>0</u></td> <td style="text-align:center;"><u>10</u></td> </tr> <tr> <td style="text-align:center;"><u>Sandy clay</u></td> <td style="text-align:center;"><u>10</u></td> <td style="text-align:center;"><u>30</u></td> </tr> <tr> <td style="text-align:center;"><u>Sand</u></td> <td style="text-align:center;"><u>30</u></td> <td style="text-align:center;"><u>40</u></td> </tr> <tr> <td style="text-align:center;"><u>Gravel</u></td> <td style="text-align:center;"><u>40</u></td> <td style="text-align:center;"><u>60</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>40</u>	<u>Gravel</u>	<u>40</u>	<u>60</u>	9. Casing: Material <u>Plastic</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>27.3</u> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dio. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>200</u>		
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10. Screen: Manufacturer's name <u>Self made</u> Type <u>PVC</u> Dia. <u>5</u> Net/gauze <u>1/2</u> Length <u>20</u> Set between <u>40</u> ft. and <u>60</u> ft. Gravel pack? <u>yes</u> size range of material <u>1/8 - 1/4</u>																					
11. Static water level: <u>16</u> ft. below land surface Date <u>1-26-78</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. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date ___				14. Well head completion: ___ Pitless adapter ___ inches above grade																	
15. Well grouted? <u>yes</u> With: ___ Neat cement <input checked="" type="checkbox"/> Bentonite ___ 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? ___ Yes ___ 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: ___ 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. <u>Myers water well</u> Business name <u>W Bond Ks</u> License No. <u>143</u> Address <u>1-26-78</u> Signed <u>A Myers</u> Date <u>1-26-78</u> Authorized representative																	
18. Elevation:		19. Remarks:		(Use a second sheet if needed)																	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley																					

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

Form WWC-5