

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

Britton. 1

X Location of well: County <i>Edwards</i> Fraction <i>C 1/4 SW 1/4 SE 1/4</i> Section number <i>15</i> Township number <i>T 24 S R 17</i> Range number <i>E/W</i>	
2. Distance and direction from nearest town or city: <i>1 north 1/2 west</i> 3. Owner of well: <i>Sterling Drilling Co</i> Street address of well location if in city: <i>of Belprie</i> R.R. or street: <i>Sterling Kansas</i> City, state, zip code: <i>Sterling Kansas</i>	
4. Locate with "X" in section below: Sketch map: 	6. Bore hole dia. <i>8</i> in. Completion date <i>Mar 6 76</i> Well depth <i>60</i>
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
	9. Casing: Material <i>Plastic</i> Height: <i>above</i> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface: <i>12</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <i>224</i> lb/ft. Dia. <i>5</i> in. to <i>60</i> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <i>200</i>
	10. Screen: Manufacturer's name <i>Peerless Plastic</i> Type <i>PVC</i> Dia. <i>5</i> Slot/gauze <i>1/8</i> Length <i>20</i> Set between <i>40</i> ft. and <i>60</i> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>1/4 - 1/2</i>
	11. Static water level: <input type="checkbox"/> mo./day/yr. <i>14</i> ft. below land surface Date <i>3-6-76</i>
	12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.
	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
	14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> inches above grade
	15. Well grouted? <i>yes</i> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.
	16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
	17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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. <i>Myers Water Well 143</i> Business name <i>Great Bend Ks</i> License No. <input type="checkbox"/> Address <i>Great Bend Ks</i> Signed <i>Alfred Myers</i> Date <i>3-6-76</i> Authorized representative

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

Form WWC-5