

USE TYPEWRITER OR BALL POINT PEN - PRESS HARDLY - PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment - Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

<b>1. Location of well:</b>	County <b>Edwards</b>	Fraction 1/4 1/4 <b>CNW</b> 1/4	Section number <b>34</b>	Township number T <b>24</b> S R	Range number <b>17</b> E <b>W</b>
<b>2. Distance and direction from nearest town or city:</b> 4 1/2 miles Southeast of Lewis, KS Street address of well location if in city:			<b>3. Owner of well:</b> R.R. or street: City, state, zip code:		
<b>4. Locate with "X" in section below:</b>			<b>Sketch map:</b>		
			<p>6. Bore hole dia. <b>24</b> in. Completion date <b>12-14-76</b> Well depth <b>88</b> ft.</p> <p>7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary</p> <p>8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other</p> <p>9. Casing: Material <b>steel</b> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>30.3</b> lbs./ft. Dia. <b>16</b> in. to <b>48</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>7 ga.</b></p> <p>10. Screen: Manufacturer's name <b>Doerr</b> Type <b>Double-slot</b> Dia. <b>16"</b> <input checked="" type="checkbox"/> Slog gauze <b>1/8"</b> Length <b>40'</b> Set between <b>48</b> ft. and <b>80 MHC</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>yes</b> Size range of material <b>3/8-200</b></p> <p>11. Static water level: <input type="checkbox"/> mo./day/yr. <b>26' 6"</b> ft. below land surface Date <b>10-18-76</b></p> <p>12. Pumping level below land surfaces: <b>N/C</b> <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.</p> <p>13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/></p> <p>14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade</p> <p>15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.</p> <p>16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Peerless Pump</b> Model number <b>12MB-5</b> HP <b>60</b> Volts <b>460</b> Length of drop pipe <b>70</b> ft. capacity <b>900</b> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other</p>		
(Use a second sheet if needed)					
<b>18. Elevation:</b> <b>2125</b>	<b>19. Remarks:</b> <b>27649</b>  <b>24 17 34 NBX</b>				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	<b>20. Water well contractor's certification:</b> This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>Clarke Well &amp; Equip., Inc. 185</b> Business name License No. Address <b>Great Bend, KS 67530</b> Signed <b>O.S. Clarke</b> Date <b>12-15-76</b> Authorized representative				

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

Form WWC-5