

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

1. Location of well:		County Edwards	Fraction 1/4 1/4 CSW 1/4	Section number 5	Township number T 24 S R	Range number 18	E W		
2. Distance and direction from nearest town or city: 8 miles Northeast of Kinsley, KS Street address of well location if in city:				3. Owner of well: Ron Henning R.R. or street: City, state, zip code: Belpre, KS 67519					
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map:			6. Bore hole dia. <u>24</u> in. Completion date <u>7-26-76</u> Well depth <u>80</u> ft.			
			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>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</td> </tr> <tr> <td>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</td> </tr> </table>			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	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	9. Casing: Material <u>steel</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <input checked="" type="checkbox"/> <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>30.3</u> lbs./ft. Dia. <u>16</u> in. to <u>40</u> ft. depth Wall Thickness <u>7</u> inches or Dia. <u> </u> in. to <u> </u> ft. depth gauge No. <u>7 ga.</u>	
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5. Type and color of material			From	To	10. Screen: Manufacturer's name <u>Doerr</u> Type <u>Double-slot</u> Dia. <u>16"</u> <u>Slot</u> gauze <u>1/8"</u> Length <u>40'</u> Set between <u>40</u> ft. and <u>80</u> ft. ft. and <u> </u> ft. Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>				
Top soil			0	4	11. Static water level: <u>16'</u> ft. below land surface Date <u>7-12-76</u> mo./day/yr.				
Gray x clay			4	10	12. Pumping level below land surfaces: <u>N/C</u> <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.				
Sand			10	14	13. Water sample submitted: <u> </u> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u> </u>				
Yellow clay			14	25	14. Well head completion: <u> </u> <u> </u> Pitless adapter <u>12</u> inches above grade				
Sand & Gravel			25	77	15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.				
Brown clay			77	80	16. Nearest source of possible contamination: <u>NONE KNOWN</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <u> </u> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
(Use a second sheet if needed)						17. Pump: <u> </u> Not installed Manufacturer's name <u>FMC Corp/Peerless</u> Model number <u>12LB-3</u> HP <u>80</u> Volts <u> </u> Length of drop pipe <u>70</u> ft. capacity <u>900</u> 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			
						18. Elevation:		19. Remarks:	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley									

24
 18
 5
 CSW
 1/4
 1/4
 1/4

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

Form WWC-5