

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 <u>Edwards</u> Fraction <u>SW 1/4 NE 1/4 NW 1/4</u> Section number <u>10</u> Township number <u>T 24 S R 18 E</u> Range number <u>18</u>	
2. Distance and direction from nearest town or city: <u>1 m. West, 3 North, 3/4 West, 1/4 South of Lewis</u> Street address of well location if in city:	
3. Owner of well: <u>Rocky Snyder</u> R.R. or street: City, state, zip code: <u>Lewis, Kansas 67552</u>	
4. Locate with "X" in section below: Sketch map: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <p>1 Mile</p> <p>1 Mile</p> </div> </div>	
5. Type and color of material	
	From To
Soil	0 2
Clay	2 30
Fine sand and clay	30 50
Fine sand	50 55
Med. sand	55 96
Clay	96 100
(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. <u>Darling Drilling Co.</u> License No. <u>189</u> Business name Address: <u>1211 West 10th, Hutchinson, Kansas</u> Signed: <u>Donald Darling</u> Date: <u>3/12/76</u> Authorized representative	

6. Bore hole dia. <u>28</u> in. Completion date <u>April 2, 1976</u> Well depth <u>96</u> ft.
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>Stainless</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>30</u> lbs./ft. Dia. <u>1 1/2</u> in. to <u>57</u> ft. depth Wall Thickness: inches or Dia. <u>3/4</u> in. to <u>3/4</u> ft. depth gage No. <u>3/4</u>
10. Screen: Manufacturer's name <u>Johnson</u> Type <u>Sanded</u> Dia. <u>1 1/2</u> Slot/gauze <u>3/16</u> Length <u>39</u> Set between <u>57</u> ft. and <u>96</u> ft. ft. and <u>96</u> ft. Gravel pack? <u>Yes</u> Size range of material <u>1/8-1/4</u>
11. Static water level: <u>38</u> ft. below land surface Date <u>Jan. 19, 1976</u> mo./day/yr.
12. Pumping level below land surfaces: <u>41</u> ft. after <u>1</u> hrs. pumping <u>800</u> g.p.m. <u>57</u> ft. after <u>1 1/2</u> hrs. pumping <u>600</u> g.p.m. Estimated maximum yield <u>850</u> g.p.m.
13. Water sample submitted: <u>XX</u> Yes <u>No</u> 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.
16. Nearest source of possible contamination: ft. <u>                    </u> Direction <u>                    </u> Type <u>                    </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Jacuzzi</u> Model number <u>4-1225</u> HP <u>60</u> Volts <u>                    </u> Length of drop pipe <u>80</u> ft. capacity <u>800</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

T 24 S R 18 E 10 SW NE NW  
 1/4 1/4 1/4 1/4  
 SECTION

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

Form WWC-5