

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 c 1/4 se 1/4	Section number 20	Township number T 24 S R 18 E 0	Range number
2. Distance and direction from nearest town or city: 3-W 1-N 1/4-W of Lewis, Ks. Street address of well location if in city:			3. Owner of well: George Wilson R.R. or street: none City, state, zip code: Turon, Kansas 67583		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>29</u> in. Completion date _____ Well depth <u>70</u> ft. <u>5-17-76</u>	
				7. <input checked="" type="checkbox"/> Cable tool 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 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	
5. Type and color of material		From	To	9. Casing: Material <u>steel</u> Height: Above or Below _____ Threaded _____ Welded _____ Surface <u>18</u> in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>70</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>7</u>	
				10. Screen: Manufacturer's name _____ Doerrs Type <u>steel</u> Dia. _____ Slot xxx <u>3/16</u> Length <u>20</u> Set between <u>50</u> ft. and <u>70</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 3/8</u>	
sandy top soil		0	3	11. Static water level: _____ mo./day/yr. <u>26</u> ft. below land surface Date <u>4-14-76</u>	
sandy brown clay		3	30	12. Pumping level below land surfaces: <u>43</u> ft. after <u>1</u> hrs. pumping <u>600</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ <u>950</u> g.p.m.	
sand & gravel clean coarse loose		30	70	13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>4-14-76</u>	
brown & white clay		70	113	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
fire clay		113	115	15. Well grouted? <input checked="" type="checkbox"/> 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.	
				16. Nearest source of possible contamination: ft. <u>1/8</u> mile Section <u>east</u> Type <u>schoolhouse</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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: <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: 2160		19. Remarks: 27305 (close) 24 18 20 DCA		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. Rosencrantz-Bemis 134 Business name License No. Address Great Bend, Kansas 67530 Signed S. Lilgoer Date 6-19-79 Authorized representative	

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

Form WWC-5

V? OK

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