

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 Kearny	Fraction SW 1/4 SW 1/4 SE 1/4	Section number 14	Township number T 24 S R 35 E/V	Range number 35
2. Distance and direction from nearest town or city: 1 1/4 Mi Strt South of Deerfield, Kansas				3. Owner of well: Samuel Boman		
Street address of well location if in city:				R.R. or street:		
				City, state, zip code: Deerfield, Kansas 67838		
4. Locate with "X" in section below:		Sketch map:				
5. Type and color of material		From	To	6. Bore hole dia. <u>24</u> in. Completion date _____ Well depth <u>64</u> ft. <u>6-10-77</u>		
				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 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 <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>36.86</u> lbs./ft. Dia. <u>16</u> in. to <u>64</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>219</u>		
				10. Screen: Manufacturer's name <u>Lakewood & Cook Screen</u> Type <u>Milllot</u> Dia. <u>16</u> Gauge <u>1/8 X 2</u> Length <u>52</u> Set between <u>12</u> ft. and <u>64</u> ft. ft. and <u> </u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1 X 1/2</u>		
				11. Static water level: _____ mo./day/yr. <u>18</u> ft. below land surface Date <u>4-30-77</u>		
				12. Pumping level below land surfaces: <u>57</u> ft. after <u>4</u> hrs. pumping <u>700</u> g.p.m. ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>700</u> g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 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 type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: <u>NA</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name <u>Johnson</u> Model number <u>12DC</u> HP _____ Volts _____ Length of drop pipe <u>50</u> ft. capacity <u>700</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		
		(Use a second sheet if needed)				
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		<p style="font-size: small;">I hereby certify that the well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.</p> <p style="text-align: center;">High Plains Drilling & Supply, Inc. 402 N 2nd Garden City, Kans. 136A License No. _____ Signed <u>Bob D. Harkness</u> Date <u>6-26-77</u> Authorized representative</p>				

T 24 S R 35 E/V
 Sec 14
 SW 1/4 SE 1/4

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

Form WWC-5