

# SYRACUSE WEST

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

## AAC

1. Location of well:		County <b>Hamilton</b>	Fraction <b>SE 1/4 NE 1/4 NE 1/4</b>	Section number <b>6</b>	Township number <b>T 24 S S R 41 W E W</b>	Range number <b>41 W E W</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <b>Loyle Smith</b> R.R. or street: City, state, zip code: <b>Long Island, Kansas 67647</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>30</u> in. Completion date _____ Well depth <u>52</u> ft. <u>8-15-76</u>		
				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 _____ Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>32</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>219</u>		
5. Type and color of material				From	To	10. Screen: Manufacturer's name _____ <b>W. A. BROWN</b>
Top soil				0	6	Type <u>Free Flo</u> Dia. <u>16</u> Slot/gauze <u>slot</u> Length <u>20</u> Set between <u>32</u> ft. and <u>52</u> ft. _____ ft. and _____ ft.
Sand & Gravel				6	50	Gravel pack? <u>yes</u> Size range of material <u>3/4</u>
Shale				50	52	11. Static water level: _____ mo./day/yr. <u>8</u> ft. below land surface Date <u>8-1-76</u>
<b>BROCK 50'</b>						12. Pumping level below land surfaces: <u>32</u> ft. after <u>4</u> hrs. pumping <u>1200</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>1600</u> g.p.m.
						13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____
						14. Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> inches above grade
						15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete _____ Depth: From <u>0</u> ft. to <u>10</u> ft.
						16. Nearest source of possible contamination: ft. _____ Direction _____ Type <u>None</u> Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No
						17. Pump: _____ Not installed Manufacturer's name <u>Layne</u> Model number <u>76900K</u> HP <u>50</u> Volts <u>460</u> Length of drop pipe <u>40</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
(Use a second sheet if needed)						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. <b>Ark Valley Pump &amp; Supply 123</b> Business name _____ License No. _____ Address <u>Box 235 Holly Colo. 810</u> Signed <u>Arno Smith</u> Date <u>11-12</u> Authorized representative
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		Level ground <b>3270 (TOP)</b>				

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