

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 NW 1/4 NW 1/4 NW 1/4	Section number 6	Township number T 25 S	Range number R 16 W	E/W												
2. Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well:															
3 1/2 South Belle 1/2 West				STERLING DRILLING CO.															
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. <u>9</u> in. Completion date <u>8-10-78</u> Well depth <u>75</u> ft.															
				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 type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other															
5. Type and color of material				9. Casing: Material _____ Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>278-3</u> lbs./ft. Dia. <u>5</u> in. to <u>25</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gauge No. <u>200</u>															
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Fine Sand</td> <td style="text-align: center;">0</td> <td style="text-align: center;">18</td> </tr> <tr> <td style="text-align: center;">Clay</td> <td style="text-align: center;">18</td> <td style="text-align: center;">40</td> </tr> <tr> <td style="text-align: center;">Gravel</td> <td style="text-align: center;">40</td> <td style="text-align: center;">75</td> </tr> </tbody> </table>					From	To	Fine Sand	0	18	Clay	18	40	Gravel	40	75	10. Screen: Manufacturer's name <u>Palmer</u> <u>Shop made</u> Type <u>Saw</u> Dia. <u>5</u> Slot/gauze <u>48</u> Length <u>30</u> Set between <u>25</u> ft. and <u>55</u> ft. _____ ft. and _____ ft. Gravel pack <u>yes</u> Size range of material <u>4-14</u>			
					From	To													
Fine Sand	0	18																	
Clay	18	40																	
Gravel	40	75																	
				11. Static water level: _____ mo./day/yr. <u>26</u> ft. below land surface Date <u>8-10-78</u>															
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ 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 checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>18</u> ft. to <u>44</u> ft.															
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input 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:		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. Myer Water Well 143 Business name _____ License No. _____ Address GT A and Ks Signed Floyd Rosendahl Date 8-10-78 Authorized representative															
Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley																			

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 25-160-6
 11/11/78

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

Form WWC-5