

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-SW</u> 1/4 1/4 1/4			Section number <u>21</u>		Township number <u>T 25 S R 16</u>		Range number <u>16</u>		
2. Distance and direction from nearest town or city: <u>6.5 mi Sulpur, Mo</u> Street address of well location if in city:					3. Owner of well: <u>D. R. Hand Drilling</u> R.R. or street: <u>1201 Washington</u> City, state, zip code: <u>Great Bend, Mo</u>						
4. Locate with "X" in section below: N W E S 1 Mile				Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>90</u> ft. <u>9/24/76</u>					
						7. 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 checked="" type="checkbox"/> Industry <input 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 _____ Height: Above or below _____ Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>160</u> lbs./ft. Dia. <u>4</u> in. to <u>90</u> ft. depth; Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth; gage No. <u>114</u>			
<u>Top Soil</u>				<u>0</u>		<u>2</u>		10. Screen: Manufacturer's name _____ <u>R+B</u>			
<u>Black clay</u>				<u>2</u>		<u>8</u>		Type <u>Puc</u> Dia. <u>4</u> Slot/gauge <u>4/16</u> Length <u>20</u> Set between <u>70</u> ft. and <u>90</u> ft. _____ ft. and _____ ft.			
<u>Sand</u>				<u>8</u>		<u>15</u>		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4-3/8-6</u>			
<u>Brown clay</u>				<u>15</u>		<u>23</u>		11. Static water level: _____ mo./day/yr. <u>8</u> ft. below land surface Date <u>9/24/76</u>			
<u>Brown clay + sand</u>				<u>23</u>		<u>32</u>		12. Pumping level below land surfaces: <u>8</u> ft. after <u>1/2</u> hrs. pumping <u>50</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.			
<u>Sand + gravel</u>				<u>32</u>		<u>53</u>		13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
<u>White &amp; brown clay</u>				<u>53</u>		<u>73</u>		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>18</u> inches above grade			
<u>Sand + gravel</u>				<u>73</u>		<u>90</u>		15. Well grouted? _____ With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>16</u> ft.			
<u>Hard white clay</u>				<u>90</u>				16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>South</u> Type <u>oil well</u> Well disinfected upon completion? _____ Yes _____ 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			
								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>Rosenrath - Bemis 134</u> Business name <u>Great Bend, Mo</u> License No. _____ Address <u>Media Station</u> Date <u>9/30/76</u> Signed _____ Authorized representative			
18. Elevation:		19. Remarks:									
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley											

T 25 S R 16 W 21 Sec 21 SW 21

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

Form WWC-5