

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/4	Section number 33	Township number T 25 S	Range number R 16 E/W
2. Distance and direction from nearest town or city: from Belpre-7s- east into location Street address of well location if in city:			3. Owner of well: Bill Roenbaugh R.R. or street: Trousdale, Ks. 67145 City, state, zip code:		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>9 7/8</u> in. Completion date <u>10-25-77</u> Well depth <u>50</u> ft.	
		7. <input checked="" 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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		9. Casing: Material <u>pvc</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>4</u> in. to <u>50</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>237</u>	
				10. Screen: Manufacturer's name <u>Certain Feed</u> Type <u>pvc</u> Dia. <u>4</u> Slot <u>1/16</u> Length <u>10</u> Set between <u>40</u> ft. and <u>50</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4</u> 3/8	
5. Type and color of material		From	To	11. Static water level: _____ mo./day/yr. <u>14 1/2</u> ft. below land surface Date <u>10-25-77</u>	
<u>Sandy top soil</u>		<u>0</u>	<u>3</u>	12. Pumping level below land surfaces: <u>15</u> ft. after <u>1</u> hrs. pumping <u>70</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
<u>Fine sand and sandy clay</u>		<u>3</u>	<u>11</u>	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
<u>Dirty sand and gravel</u>		<u>11</u>	<u>17</u>	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>18</u> inches above grade	
<u>Brown clay</u>		<u>17</u>	<u>33</u>	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.	
<u>Sand and gravel lot of clay</u>		<u>33</u>	<u>40</u>	16. Nearest source of possible contamination: ft. <u>500</u> Direction <u>NW</u> Type <u>septic tank</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <u>HTH</u> No	
<u>Brown and white clay</u>		<u>40</u>	<u>46</u>	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	
<u>Sand and gravel</u>		<u>46</u>	<u>55</u>	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. <u>Rosencrantz-Bemis 134</u> Business name _____ License No. _____ Address <u>Great Bend, Ks.</u> Signed <u>[Signature]</u> Date <u>1/77</u> Authorized representative	

25 tank
 160
 33
 NUMBERS
 1/4
 1/4
 1/4

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

Form WWC-5