

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 C 1/4 NE 1/4 NE 1/4	Section number 27	Township number T 25	Range number S R 17	E/W
2. Distance and direction from nearest town or city: 3 miles South 4 1/2 West 1 3/4 North				3. Owner of well: B-N DRIG			
Street address of well location if in city:				R.R. or street:			
City, state, zip code: GT BEND MO							
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 in. Completion date 10-2-78		Well depth 60 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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		9. Casing: Material <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Dia. 5 in. to 60 ft. depth	
5. Type and color of material				From	To	10. Screen: Manufacturer's name Pearless Mfg	
Sandy Clay				0	10	Type SAW Dia. 5	
Fine Sand				10	30	Slot/gauze 1/8 Length 20	
Gravel				30	60	Set between 60 ft. and 40 ft. Gravel pack? yes Size range of material 1/4-1/8	
						11. Static water level: 8 ft. below land surface Date 10-2-78	
						12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
						13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
						14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade	
						15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 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:			
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Myers Water Well 143 Business name _____ License No. _____ Address Great Bend KS Signed Delroy Rosenthal Date 10-2 Authorized representative			

T 25
 R 17
 Sec 27
 1/4 NE 1/4 NE

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

Farm WWC-5