

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>NW 1/4 NW 1/4 NE 1/4</u> Section number <u>12</u> Township number <u>T 25 S</u> Range number <u>R 18</u> (NW)	
2. Distance and direction from nearest town or city: <u>3 S. Lewis Kansas</u>	
3. Owner of well: <u>Bay & Mundhenke</u> R.R. or street: _____ City, state, zip code: <u>Lewis Kansas</u>	
4. Locate with "X" in section below: Sketch map: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <p style="text-align: center;">N</p> </div> </div>	
5. Type and color of material	
	From To
<u>Top Sand</u>	<u>0 2</u>
<u>Sandy Clay</u>	<u>2 18</u>
<u>Gravel</u>	<u>18 34</u>
<u>Clay</u>	<u>34 37</u>
<u>Gravel</u>	<u>37 60</u>
(Use a second sheet if needed)	
18. Elevation:	19. Remarks:
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	
6. Bore hole dia. <u>8 1/2</u> in. Completion date <u>4-1-78</u> Well depth <u>60</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>PI</u> Height: Above or below Threaded <input type="checkbox"/> Welded <u>GI</u> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>200</u>	
10. Screen: Manufacturer's name <u>Sunflower Plastics</u> Type <u>RMP</u> Dia. _____ Slot/gauze <u>1/8</u> Length <u>20</u> Set between <u>40</u> ft. and <u>60</u> ft. Gravel pack? <u>All</u> size range of material _____	
11. Static water level: _____ mo./day/yr. <u>37</u> ft. below land surface Date <u>4-1-78</u>	
12. Pumping level below land surfaces: <u>37</u> ft. after <u>1</u> hrs. pumping <u>3</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>20</u> g.p.m.	
13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
14. Well head completion: <u>12</u> inches above grade <input type="checkbox"/> Pitless adapter	
15. Well grouted? <u>YES</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>6</u> ft. to <u>10</u> ft.	
16. Nearest source of possible contamination: <u>LTD Stock</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
17. Pump: <u>6' Windmill</u> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe <u>42</u> ft. capacity <u>3</u> 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. CARL HAYSE WATER WELL SERV. 224 Business name License No. <u>603 S. Maple, Greensburg, Kans.</u> Address Signed <u>Carl Hayse</u> Date <u>4-1-78</u> Authorized representative	

T 25 S
 R 18
 NW
 E
 12 NW 1/4 NE
 Sec 1/4 1/4 1/4

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

Form WWC-5