

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

OFFERLE
SE

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

DCC

1. Location of well:		County Ford	Fraction SW 1/4 SW 1/4 SE 1/4	Section number 25 27	Township number T 21 25 S	Range number R 21 E/W																					
2. Distance and direction from nearest town or city: 2 miles South & 1 1/2 East of Bellfont, Kansas Street address of well location if in city:			3. Owner of well: Clarence Berand R.R. or street: % Christina Kasselmann City, state, zip code: Spearville, Kansas 67876																								
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>135</u> ft. <u>9-13-78</u>																							
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>5. Type and color of material</td> <td>From</td> <td>To</td> </tr> <tr> <td>Top soil & clay</td> <td>0</td> <td>15</td> </tr> <tr> <td>Clay</td> <td>15</td> <td>90</td> </tr> <tr> <td>Clay & sand stone</td> <td>90</td> <td>105</td> </tr> <tr> <td>Sand stone & clay layers</td> <td>105</td> <td>120</td> </tr> <tr> <td>Clay</td> <td>120</td> <td>135</td> </tr> <tr> <td colspan="3" style="text-align: center;"> BRICK 90 75 75 sat thick </td> </tr> </table>		5. Type and color of material	From	To	Top soil & clay	0	15	Clay	15	90	Clay & sand stone	90	105	Sand stone & clay layers	105	120	Clay	120	135	BRICK 90 75 75 sat thick			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		
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BRICK 90 75 75 sat thick																											
8. Use: <input checked="" 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>RMP</u> Height: Above <u>XXXXX</u> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>135</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>250</u>																								
(Use a second sheet if needed)			10. Screen: Manufacturer's name <u>Sunflower</u> Type <u>RMP</u> Dia. <u>5"</u> Slot/gauge: <u>1/8"</u> Length <u>20 ft.</u> Set between <u>110</u> ft. and <u>130</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/4"</u>																								
			11. Static water level: _____ mo./day/yr. <u>75</u> ft. below land surface Date <u>9-13-78</u>																								
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>10</u> g.p.m.																								
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____																								
			14. Well head completion: <u>none</u> <input type="checkbox"/> Pitless adapter _____ 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>0</u> ft. to <u>10</u> ft.																								
			16. Nearest source of possible contamination: <u>none</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																								
			17. Pump: <u>Windmill</u> <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. Joe's Well Service <u>179</u> Business name License No. Address: <u>Box 174 Cimarron, Ka.</u> Signed <u>John C. Nick</u> <u>11-3-78</u> Authorized representative Date																								
			18. Elevation:	19. Remarks: Pasture well TOPD		2314 90 2224																					

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