

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 <b>Ford</b>	Fraction <b>SE 1/4 SE 1/4 NE 1/4</b>	Section number <b>35</b>	Township number <b>T 25</b>	Range number <b>S R 26</b>	E/W <b>E/W</b>
2. Distance and direction from nearest town or city: <b>2 1/2 miles North, 2 miles East and 1/2 North of Howell, Kansas</b> Street address of well location if in city:				3. Owner of well: <b>Frank Buehne</b> R.R. or street: <b>North Star Route</b> City, state, zip code: <b>Dodge City, Kansas 67801</b>			
4. Locate with "X" in section below:  <div style="text-align: center;"> </div>			Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>85</u> ft. <u>9-20-77</u>		
5. Type and color of material			From	To	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		
Top soil & clay			0	15	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		
Clay & cleechy			15	30	9. Casing: Material <u>RMP</u> Height: Above <del>XXXX</del> 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>85</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>250</u>		
<del>Clay cleechy &amp; rock layers</del>			30	45	10. Screen: Manufacturer's name _____ <b>Sunflower</b> Type <u>RMP</u> Dia. <u>5"</u> Slot <del>xxx</del> <u>60</u> <u>1/8"</u> Length <u>20 ft.</u> Set between <u>60</u> ft. and <u>80</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/4"</u>		
Rock layers & fine sand			45	60	11. Static water level: _____ mo./day/yr. <u>62</u> ft. below land surface Date <u>9-20-77</u>		
Fine to coarse sand			60	75	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>15</u> _____ g.p.m.		
Coarse (5 ft.) sand & clay			75	90	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
					14. Well head completion: <u>none</u> <input type="checkbox"/> Pitless adapter _____ Inches above grade		
					15. Well grouted? <u>yes</u> 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.		
					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		
					(Use a second sheet if needed)		
18. Elevation:		19. Remarks: <b>in a pasture</b>				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. <b>Joe's Well Service</b> <u>179</u> Business name License No. Address <u>Box 174 Cimarron, Ks.</u> Signed <u>Larry Crick</u> <u>12-26-77</u> Authorized representative Date	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley							

25  
 26  
 35  
 SE SE NE  
 1/4 1/4 1/4  
 Sec