

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>Sedg.</u> <u>SE</u> <u>SE 1/4 NE 1/4 SE 1/4</u>		Section number <u>19</u>	Township number <u>26</u> S R <u>1</u> E W	Range number																		
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>629 Queen Maize KS 67101</u>		3. Owner of well: <u>Ralph Bigelow</u> R.R. or street: <u>635 Queen</u> City, state, zip code: <u>Maize KS 67101</u>																				
4. Locate with "X" in section below: N Sketch map: <u>IV</u>		6. Bore hole dia. <u>11</u> in. Completion date <u>8/18/77</u> Well depth <u>45</u> ft.																				
		7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary																				
5. Type and color of material		8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other																				
<table border="1"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>Top soil.</u></td> <td><u>0</u></td> <td><u>6</u></td> </tr> <tr> <td><u>redish clay.</u></td> <td><u>6</u></td> <td><u>18</u></td> </tr> <tr> <td><u>med sand</u></td> <td><u>18</u></td> <td><u>26</u></td> </tr> <tr> <td><u>red clay layer</u></td> <td><u>26</u></td> <td><u>27</u></td> </tr> <tr> <td><u>med to coarse gravel</u></td> <td><u>27</u></td> <td><u>45</u></td> </tr> </tbody> </table>			From	To	<u>Top soil.</u>	<u>0</u>	<u>6</u>	<u>redish clay.</u>	<u>6</u>	<u>18</u>	<u>med sand</u>	<u>18</u>	<u>26</u>	<u>red clay layer</u>	<u>26</u>	<u>27</u>	<u>med to coarse gravel</u>	<u>27</u>	<u>45</u>	9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below Threaded ☐ Welded ☐ Surface <u>12</u> in. RMP ☐ PVC ☒ Weight <u>2.31</u> lbs./ft. Dia <u>5</u> in. to <u>45</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>45</u> ft. depth gage No. <u>1214</u>		
	From	To																				
<u>Top soil.</u>	<u>0</u>	<u>6</u>																				
<u>redish clay.</u>	<u>6</u>	<u>18</u>																				
<u>med sand</u>	<u>18</u>	<u>26</u>																				
<u>red clay layer</u>	<u>26</u>	<u>27</u>																				
<u>med to coarse gravel</u>	<u>27</u>	<u>45</u>																				
		10. Screen: Manufacturer's name <u>MPI</u> Type <u>PVC</u> Dia. <u>5 1/4</u> Slot/gauze <u>1 1/16</u> Length <u>5 1/2</u> Set between <u>40</u> ft. and <u>45</u> ft. Gravel pack? <u>Yes</u> Size range of material <u>3/8</u>																				
		11. Static water level: <u>22</u> ft. below land surface Date <u>8/18/77</u>																				
		12. Pumping level below land surfaces: <u>23</u> ft. after <u>1/2</u> hrs. pumping <u>20</u> g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>50</u> g.p.m.																				
		13. Water sample submitted: ____ Yes ☒ No Date ____																				
		14. Well head completion: ☒ Pitless adapter <u>12</u> inches above grade																				
		15. Well grouted? <u>Yes</u> With: ☒ Neat cement ☐ Bentonite ☐ Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.																				
		16. Nearest source of possible contamination: ft. ____ Direction <u>NONE</u> Type ____ Well disinfected upon completion? ☒ Yes ____ No																				
		17. Pump: ☐ Not installed Manufacturer's name <u>Pumpco</u> Model number <u>1052A</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe <u>30</u> ft. capacity <u>12</u> g.p.m. Type: ☒ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other																				
18. Elevation:		19. Remarks: <u>Contractor to furnish 4x4x4 reinforced slab around well casing</u>																				
Topography: ☐ Hill ☐ Slope ☒ Upland ☐ Valley		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>Wenger Bulling</u> 318 Business name <u>Colwick</u> License No. ____ Address ____ Signed <u>James Wenger</u> 8/19/77 Authorized representative																				

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

Form WWC-5