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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>            | Fraction <u>NE 1/4 SE 1/4 SE 1/4</u> | Section number <u>19</u>                                                                                                                                                                                                                                                                                                                                                                                                               | Township number <u>26</u> | Range number <u>1</u> |
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city: <u>743 Opal Maize KS.</u> |  |                                |                                      | 3. Owner of well: <u>FRANK Pegg</u><br>R.R. or street: <u>742 attention</u><br>City, state, zip code: <u>Maize KS 67101</u>                                                                                                                                                                                                                                                                                                            |                           |                       |
| 4. Locate with "X" in section below:                                                                                          |  | Sketch map:                    |                                      | 6. Bore hole dia. <u>1 1/2</u> in. Completion date <u>2/25/78</u><br>Well depth <u>49</u> ft.                                                                                                                                                                                                                                                                                                                                          |                           |                       |
|                                                                                                                               |  |                                |                                      | 7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary                                                                                                                                                                    |                           |                       |
| 5. Type and color of material                                                                                                 |  | From                           | To                                   | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other                                                                                 |                           |                       |
| Top soil.                                                                                                                     |  | 0                              | 4                                    | 9. Casing: Material <u>PVC</u> Height <u>Above</u> or below<br>Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>1 1/2</u> in.<br>RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>2.76</u> lbs./ft.<br>Dia. <u>5</u> in. to <u>49</u> ft. depth Wall Thickness: inches or<br>Dia. <u>5</u> in. to <u>49</u> ft. depth gage No. <u>258</u>                         |                           |                       |
| Red clay.                                                                                                                     |  | 4                              | 18                                   | 10. Screen: Manufacturer's name <u>M.P.I.</u><br>Type <u>2 1/2</u> Dia. <u>5</u> in.<br>Slot/gauze <u>1/16</u> Length <u>10</u> ft.<br>Set between <u>39</u> ft. and <u>490</u> ft.<br><u>39</u> ft. and <u>490</u> ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/8</u>                                                                                                                          |                           |                       |
| fine to med. sand                                                                                                             |  | 18                             | 33                                   | 11. Static water level: <u>23</u> ft. below land surface Date <u>2/25/78</u><br>no./day/yr.                                                                                                                                                                                                                                                                                                                                            |                           |                       |
| red clay.                                                                                                                     |  | 33                             | 34                                   | 12. Pumping level below land surfaces:<br><u>24</u> ft. after <u>12</u> hrs. pumping <u>20</u> g.p.m.<br><u>24</u> ft. after <u>12</u> hrs. pumping <u>20</u> g.p.m.<br>Estimated maximum yield <u>25</u> g.p.m.                                                                                                                                                                                                                       |                           |                       |
| coarse gravel                                                                                                                 |  | 34                             | 49                                   | 13. Water sample submitted: <u>Yes</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u>2/25/78</u><br>mo./day/yr.                                                                                                                                                                                                                                                                                              |                           |                       |
|                                                                                                                               |  |                                |                                      | 14. Well head completion:<br><input checked="" type="checkbox"/> Pitless adapter <u>12</u> inches above grade                                                                                                                                                                                                                                                                                                                          |                           |                       |
|                                                                                                                               |  |                                |                                      | 15. Well grouted? <u>Yes</u><br>With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete<br>Depth: From <u>3</u> ft. to <u>13</u> ft.                                                                                                                                                                                                                                |                           |                       |
|                                                                                                                               |  |                                |                                      | 16. Nearest source of possible contamination:<br>ft. <u>NO</u> Direction <u>NE</u> Type <u>NO</u><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                             |                           |                       |
|                                                                                                                               |  |                                |                                      | 17. Pump: <u>Not installed</u><br>Manufacturer's name <u>EGT</u><br>Model number <u>10518</u> HP <u>1/2</u> Volts <u>220</u><br>Length of drop pipe <u>35</u> ft. capacity <u>12</u> g.p.m.<br>Type:<br><input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |                           |                       |
| 18. Elevation:                                                                                                                |  | (Use a second sheet if needed) |                                      | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief:<br><u>Whymper Building 318</u><br>Business name <u>Whymper Building 318</u> License No. <u>1/4 1/4 1/4</u><br>Address <u>Whymper Building 318</u><br>Signature <u>Whymper Building 318</u> Date <u>2/25/78</u><br>Authorized representative                                  |                           |                       |
| 19. Remarks:<br><u>Customer to furnish 4x4x4</u><br><u>slab as required by State</u><br><u>X</u> <u>Trigg</u>                 |  |                                |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           |                       |

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

Form WWC-5