

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>Butt</u> | | Fraction <u>C-NW 1/4</u> 1/4 1/4 1/4 | | Section number <u>14</u> | | Township number <u>T 26</u> | | Range number <u>S R 15 W E/W</u> | |
| 2. Distance and direction from nearest town or city: <u>1 N 3 W 1/2 1/2 W 1/4 SE of</u> Street address of well location if in city: <u>Byers, Kans.</u> | | | | 3. Owner of well: <u>Brian S. Curtis</u> R.R. or street: City, state, zip code: <u>Byers, Kans 67021</u> | | | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile | | | | Sketch map: | | 6. Bore hole dia. <u>38</u> in. Completion date <u>11-10-75</u> Well depth <u>106</u> ft. | | | |
| | | | | 7. Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary | | 8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other | | | |
| | | | | 9. Casing: Material <u>Steel</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>16</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>1 1/2</u> in. to <u>106</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>722a</u> | | 10. Screen: Manufacturer's name <u>W.A. Brown Ent.</u> Type <u>St. Iron</u> Dia. <u>1 1/2</u> " Slot/gauze <u>1/4</u> " Length <u>40</u> " Set between <u>66</u> ft. and <u>106</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8" - 3/8"</u> | | | |
| 5. Type and color of material | | | | From | | To | | 11. Static water level: _____ mo./day/yr. <u>17</u> ft. below land surface Date <u>Nov 10-75</u> | |
| <u>Sandy top Soil</u> | | | | <u>0'</u> | | <u>7'</u> | | 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m. | |
| <u>Brn. Clay.</u> | | | | <u>7'</u> | | <u>25'</u> | | 13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____ | |
| <u>Sand + Gravel</u> | | | | <u>25'</u> | | <u>60'</u> | | 14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade | |
| <u>Brn Clay.</u> | | | | <u>60'</u> | | <u>65'</u> | | 15. Well grouted? _____ With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>16</u> ft. | |
| <u>Gravel</u> | | | | <u>65'</u> | | <u>106'</u> | | 16. Nearest source of possible contamination: ft. <u>2640</u> Direction <u>North</u> Type <u>Oil Well</u> Well disinfected upon completion? _____ Yes _____ No | |
| <u>White Clay.</u> | | | | | | | | 17. Pump: _____ Not installed Manufacturer's name <u>Water Land Rec</u> Model number _____ HP _____ Volts _____ Length of drop pipe <u>70</u> ft. capacity <u>See</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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) | | | | | | | | 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>Wells Drilling Co 112</u> Business name _____ License No. _____ Address <u>1030 Hiway 54 East</u> Signed <u>Wal Wells</u> Date <u>Nov 10/75</u> Authorized representative | |
| 18. Elevation: | | 19. Remarks: | | | | | | | |
| Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | | | | |

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

Kingman Kans
67068