

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 <i>Edwards</i>	Fraction <i>NW 1/4 NW 1/4 NE 1/4</i>	Section number <i>10</i>	Township number <i>T 26 S</i>	Range number <i>R 16 W</i>
2. Distance and direction from nearest town or city: <i>from Inausdale 2.5 - 1 1/4 E - south</i>			3. Owner of well: <i>B+N Drilling</i>			
Street address of well location if in city: <i>side Rd.</i>			R.R. or street: <i>Box 840</i>			
4. Locate with "X" in section below:			Sketch map:			6. Bore hole dia. <i>4 1/2</i> in. Completion date Well depth <i>60</i> ft. <i>1-17-78</i>
						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
5. Type and color of material			From	To	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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<i>Top soil</i>			<i>0</i>	<i>2</i>	9. Casing: Material <i>pvc</i> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>18</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <i>4 1/2</i> in. to <i>60</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. <i>1237</i>	
<i>Sandy clay</i>			<i>2</i>	<i>12</i>	10. Screen: Manufacturer's name <i>Caustain-test</i> Type <i>pvc</i> Dia. <i>4 1/2</i> Slot/gauge <i>1/16</i> Length <i>20</i> Set between <i>40</i> ft. and <i>60</i> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>3/4-3/8-1/4</i>	
<i>Sand + gravel</i>			<i>12</i>	<i>14</i>	11. Static water level: _____ mo./day/yr. <i>7 1/2</i> ft. below land surface Date <i>1-17-78</i>	
<i>Clay</i>			<i>14</i>	<i>22</i>	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.	
<i>Sand + gravel</i>			<i>22</i>	<i>62</i>	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
<i>Clay</i>			<i>62</i>		14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
					<input checked="" type="checkbox"/> Well grouted? <i>NO</i> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft.	
					16. Nearest source of possible contamination: ft. <i>75</i> Direction <i>East</i> Type <i>oil well</i> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <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. <i>Rosencrantz-Bemis</i> <i>134</i> Business name License No. Address <i>Great Bend, Kansas</i> <i>67530</i> Signed: <i>Sandy Hilgore</i> Date <i>1-20-78</i> Authorized representative	
18. Elevation:			19. Remarks: <i>Well was pulled & plugged with well cuttings & gravel pack.</i>			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

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

Form WWC-5

T 26
 R 16 W
 Sec 10
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