

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 Edwards	Fraction CENTER 1/4 1/4 SW 1/4	Section number 14	Township number T 26 S R 16	Range number 16
2. Distance and direction from nearest town or city: 4 miles Southeast of Trousdale, KS Street address of well location if in city:			3. Owner of well: Norman Wood R.R. or street: (?) City, state, zip code: Trousdale, KS 67145			
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <u>24</u> in. Completion date <u>3-24-78</u> Well depth <u>161</u> ft. (Well Drilled)			
			7. <input type="checkbox"/> 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			
5. Type and color of material			8. Use: <input type="checkbox"/> 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: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>30.3</u> lbs./ft. Dia. <u>SEE LEFT</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>7 ga.</u>			
			10. Screen: Manufacturer's name <u>Doerr</u> Type <u>Double-slot</u> Dia. <u>16"</u> Slot gauze <u>1/8"</u> Length <u>52'</u> Set between <u>SEE LEFT</u> ft. and <u> </u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>			
			11. Static water level: <u> </u> mo./day/yr. <u>20</u> ft. below land surface Date <u>3-24-78</u>			
			12. Pumping level below land surfaces: <u>Not checked</u> <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.			
			13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>			
			14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> 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>FIELD</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
			17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Peerless Pump Co.</u> Model number <u>12LB-3</u> HP <u>80</u> Volts <u> </u> Length of drop pipe <u>70</u> ft. capacity <u>1000</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			
18. Elevation: <u>2069'</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			19. Remarks: CASING & SCREEN RECORD: Plain Casing (68') <u>0</u> <u>68</u> Screen (20') <u>68</u> <u>88</u> Plain Casing (21') <u>88</u> <u>109</u> Screen (12') <u>109</u> <u>121</u> Plain Casing (20') <u>121</u> <u>141</u> Screen (20') <u>141</u> <u>161</u>			
			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. Clarke Well & Eq., Inc. 185 Business name <u>Great Bend, KS 67530</u> License No. <u> </u> Address <u> </u> Signed <u>D.W. Clarke</u> Date <u>4-5-78</u> Authorized representative			

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

Form WWC-5