

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82g-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:		County Edwards	Fraction 1/4 cne 1/4 SW 1/4	Section number 35	Township number T 26	Range number S R 17W	E/W						
2. Distance and direction from nearest town or city: 5s 1 1/2 e Street address of well location if in city: Fellsburg, Ks.				3. Owner of well: Damac Drlg Inc. R.R. or street: Box 1164 Great Bend, Ks. City, state, zip code:									
4. Locate with "X" in section below: <div style="text-align: center;">N <table border="1" style="margin: auto; border-collapse: collapse;"><tr><td style="width: 50px; height: 50px; text-align: center; vertical-align: middle;">NW</td><td style="width: 50px; height: 50px; text-align: center; vertical-align: middle;">NE</td></tr><tr><td style="width: 50px; height: 50px; text-align: center; vertical-align: middle;">SW</td><td style="width: 50px; height: 50px; text-align: center; vertical-align: middle;">SE</td></tr></table> S 1 Mile</div>				NW	NE	SW	SE	Sketch map: <div style="text-align: center;">1 Mile</div>				6. Bore hole dia. 8 in. Completion date Well depth 60 ft. 1-3-78	
NW	NE												
SW	SE												
5. Type and color of material				From		To		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					
								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					
								9. Casing: Material <input type="checkbox"/> Height: Above XXXX Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 2.8 lbs./ft. Dia. 5 in. to 60 ft. depth Wall Thickness: inches Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. sch 40					
								10. Screen: Manufacturer's name Jetstream Type pvc Dia. 5" Slot/gauze 1/32" Length 20' Set between 40 ft. and 60 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8-3/4					
								11. Static water level: <input type="checkbox"/> mo./day/yr. 15 ft. below land surface Date 1-3-78					
								12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 60 g.p.m.					
								13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date					
								14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade					
								15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.					
								16. Nearest source of possible contamination: oil ft. 55 Direction n Type test Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
								17. Pump: Manufacturer's name Goulds Model number utm HP 5 Volts 230 Length of drop pipe 42 ft. capacity 60 g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other					
								18. Elevation:	19. Remarks:				
								Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> 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. Kellys Waterwell ser 186 Business name License No. Address R2 Great Bend, Ks. Signed _____ Date 8-22 Authorized representative					
								(Use a second sheet if needed)					

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

Form WWC-5