

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>Edwards</u>	Fraction: <u>1/4 C 1/4 SE 1/4</u>	Section number: <u>9</u>	Township number: T <u>26</u> S R <u>19</u> E/W	Range number: <u>19</u>
2. Distance and direction from nearest town or city: <u>9 mi. South of Hinsley, KS.</u>			3. Owner of well: <u>Kennith Kuhn</u>		
Street address of well location if in city:			R.R. or street:		
			City, state, zip code: <u>Hinsley, Mo 67547</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8 1/2</u> in. Completion date <u>1-5-78</u>	
				Well depth <u>80</u> ft.	
				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 checked="" 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<u>Black top soil</u>		<u>0</u>	<u>3</u>	9. Casing: Material <u>pvc</u> Height: Above or <u>below</u>	
<u>Red clay fine sand</u>		<u>3</u>	<u>15</u>	Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>24</u> in.	
<u>Sand &amp; gravel</u>		<u>15</u>	<u>37</u>	RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft.	
<u>yellow clay</u>		<u>37</u>	<u>38</u>	Dia. <u>4 1/2</u> in. to <u>75</u> ft. depth Wall Thickness: inches or	
<u>Sand &amp; gravel</u>		<u>38</u>	<u>52</u>	Dia. _____ in. to _____ ft. depth gage No. <u>1237</u>	
<u>yellow clay</u>		<u>52</u>	<u>54</u>	10. Screen: Manufacturer's name _____	
<u>Sand &amp; gravel</u>		<u>54</u>	<u>80</u>	Type <u>pvc</u> Dia. <u>4</u>	
				Slot/groove <u>1/16</u> Length <u>15</u>	
				Set between <u>60</u> ft. and <u>75</u> ft.	
				_____ ft. and _____ ft.	
				Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4-3/8</u>	
				11. Static water level: _____ mo./day/yr.	
				<u>30.5</u> ft. below land surface Date <u>1-5-78</u>	
				12. Pumping level below land surfaces:	
				<u>30.5</u> ft. after <u>12</u> hrs. pumping <u>10</u> g.p.m.	
				_____ ft. after _____ hrs. pumping _____ g.p.m.	
				Estimated maximum yield _____ g.p.m.	
				13. Water sample submitted: _____ mo./day/yr.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>1-5-78</u>	
				14. Well head completion:	
				<input type="checkbox"/> Pitless adapter _____ Inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/>	
				With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete	
				Depth: From _____ ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination:	
				ft. <u>81</u> Direction <u>SE</u> Type <u>Septic tank</u>	
				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	
				(Use a second sheet if needed)	
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography:			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
<input type="checkbox"/> Hill			<u>Rosenburg - Bernis 134</u>		
<input type="checkbox"/> Slope			Business name <u>Great Bend, Mo</u> License No. _____		
<input checked="" type="checkbox"/> Upland			Address _____		
<input type="checkbox"/> Valley			Signed <u>Samuel [unclear]</u> Date <u>1-25-78</u>		
				Authorized representative	

T 26  
 R 19  
 W 9  
 E 0  
 S E  
 Sec 9  
 1/4 1/4 1/4 1/4

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

Form WWC-3