

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>SW 1/4 NW 1/4 NW 1/4</u> Section number <u>34</u> Township number <u>T 26 S</u> Range number <u>R 19</u> (NW)	
2. Distance and direction from nearest town or city: <u>11 S. Kinsley</u> Street address of well location if in city: <u>Tanous</u>	
3. Owner of well: <u>Art Polson</u> R.R. or street: City, state, zip code: <u>Kinsley Kansas</u>	
4. Locate with "X" in section below: Sketch map: <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <p>1 Mile</p> <p>1 Mile</p> </div> <div> <p>6. Bore hole dia. <u>8 3/4</u> in. Completion date <u>8-18-78</u> Well depth <u>160</u> ft.</p> <p>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</p> <p>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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other</p> <p>9. Casing: Material <u>PI</u> Height: Above or below Threaded <input type="checkbox"/> Welded <u>GI</u> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>1.5</u> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>200</u></p> </div> </div>	
5. Type and color of material	
Top Soil	From 0 To 3
Clay	3 17
Clay Sand	17 19
Clay	19 21
Gravel	21 49
Clay	49 51
Gravel	51 60
10. Screen: Manufacturer's name <u>Sunflower Plastics</u> Type <u>RMP</u> Dia. <u>5</u> Slot gauze <u>1/8</u> Length <u>20</u> Set between <u>40</u> ft. and <u>60</u> ft. Gravel pack? <u>yes</u> Size range of material <u>5x34</u>	
11. Static water level: <u>42</u> ft. below land surface Date <u>8-18-78</u>	
12. Pumping level below land surfaces: <u>42</u> ft. after <u>1</u> hrs. pumping <u>3</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>10</u> g.p.m.	
13. Water sample submitted: <u> </u> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u> </u> mo./day/yr.	
14. Well head completion: <u> </u> 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>Live stock</u> ft. Direction <u>to ch</u> type <u> </u> Well disinfected upon completion? <u> </u> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
17. Pump: <u> </u> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u>50</u> ft. capacity <u>3</u> 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: 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>Carl Hays</u> Business name <u>Water Wells Inc.</u> License No. <u>22f</u> <u>603 So. Maple Kinsley Mo</u> Address Signed <u>Carl Hays</u> Date <u>8-18-78</u> Authorized representative

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

Form WWC-5

T 26 S
 R 19
 Sec 34
 NW 1/4 SW 1/4 NW 1/4