

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

CAH

1. Location of well:		County <b>Ford</b>	Fraction <b>NE 1/4 NE 1/4 SW 1/4</b>	Section number <b>26</b> <del>#28</del>	Township number <b>T #25</b>	Range number <b>S R #25</b>	<b>E/W</b>
2. Distance and direction from nearest town or city: <b>City, Ks. in town - Dodge</b>			3. Owner of well: <b>Jon Maynard</b>				
Street address of well location if in city: <b>West Park St.</b>			R.R. or street: <b>West Park</b>				
			City, state, zip code: <b>Dodge City, Kansas 67801</b>				
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <u>8</u> in. Completion date _____		
					Well depth <u>185</u> ft. <u>6-23-76</u>		
					7. <input checked="" 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 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		
					9. Casing: Material <u>RMP</u> Height: Above or below _____ Threaded _____ Welded _____ Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>185</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>250</u>		
5. Type and color of material		From	To	10. Screen: Manufacturer's name _____ <b>Sunflower</b>			
<b>Topsoil &amp; sand</b>		0	15	Type <u>RMP</u> Dia. <u>5"</u> Slot/gage <u>1 8"</u> Length <u>20 ft.</u>			
<b>Coarse sand</b>		15	30	Set between <u>160</u> ft. and <u>180</u> ft. _____ ft. and _____ ft.			
<b>Medium sand &amp; clay</b>		30	60	Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>4"</u>			
<b>Medium sand</b>		60	90	11. Static water level: _____ mo./day/yr. <u>15</u> ft. below land surface Date <u>6-23-76</u>			
<b>Fine sand</b>		90	135	12. Pumping level below land surfaces: <u>20</u> ft. after <u>2</u> hrs. pumping <u>70</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>90</u> g.p.m.			
<b>Coarse sand</b>		135	150	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
<b>Medium to coarse sand</b>		150	180	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>21</u> inches above grade			
<b>Clay &amp; blue shale</b>		180	195	15. Well grouted? <input checked="" type="checkbox"/> <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>7</u> ft. to <u>30</u> ft.			
				16. Nearest source of possible contamination: ft. <u>80</u> Direction <u>west</u> Type <u>Sewer</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
				17. Pump: _____ Not installed Manufacturer's name <u>Flint &amp; Walling</u> Model number <u>10BK9</u> HP <u>1</u> Volts <u>230</u> Length of drop pipe <u>105</u> ft. capacity <u>19</u> 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:		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.			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		2562 180 7382		<u>JOE'S WELL SERVICE</u> <u>179</u> Business name License No. Address <u>Box 174 Cimarron, Ks.</u> Signed <u>Larry C. Cook</u> Date <u>6-30-76</u> Authorized representative			

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

Form WWC-5

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