

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 <b>Kiowa</b>	Fraction <b>1/4 1/4 CNW 1/4</b>	Section number <b>36</b>	Township number <b>T 27 S R 16 EW</b>	Range number
2. Distance and direction from nearest town or city: <b>6 1/2 miles NE of Haviland, KS</b> Street address of well location if in city:			3. Owner of well: <b>RM Duane Swafford (Swafford Bros.)</b> R.R. or street: <b>Box 1301</b> City, state, zip code: <b>Twin Falls, ID 83301</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>24</u> in. Completion date <u>6-29-76</u> Well depth <u>148</u> ft.	
		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		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>16</u> in. to <u>100</u> ft. depth Wall Thickness: inches or Dia. <u>  </u> in. to <u>  </u> ft. depth gage No. <u>7 ga</u>	
5. Type and color of material			From	To	10. Screen: Manufacturer's name <u>Doerr</u>
top soil & sand			0	11	Type <u>Double-slot</u> Dia. <u>16"</u> <input checked="" type="checkbox"/> Slot gauze <u>1/8</u> Length <u>48'</u> Set between <u>100</u> ft. and <u>148</u> ft. <u>  </u> ft. and <u>  </u> ft. Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>
sandy clay & sand streak			11	72	11. Static water level: <u>64'</u> ft. below land surface Date <u>6-22-76</u> mo./day/yr.
sand & gravel			72	92	12. Pumping level below land surfaces: N/C <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.
brown clay			92	95	13. Water sample submitted: <u>  </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u>  </u>
sand & gravel & clay streaks at 117 & 125			95	147	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade
gray clay			147	148	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.
(Use a second sheet if needed)			16. Nearest source of possible contamination: ft. <u>  </u> Direction <u>  </u> Type <u>  </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			17. Pump: Not installed Manufacturer's name <u>FMC--Peerless Corp</u> Model number <u>12LB-3</u> HP <u>80</u> Volts <u>--</u> Length of drop pipe <u>100</u> ft. capacity <u>900</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:	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>Clarke Well &amp; Equip. Inc.</u> 185 Business name License No. <u>  </u> Address <u>Great Bend, KS 67530</u> Signed <u>[Signature]</u> Date <u>7-7-76</u> Authorized representative		

27  
 16  
 36  
 1/4  
 1/4  
 1/4

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

Form WWC-5