

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

WATER WELL RECORD  
KSA 820-1201-1215

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

1. Location of well:		County <i>Kiowa</i>	Fraction <i>1/4 C 1/4 SW 1/4</i>	Section number <i>7</i>	Township number T <i>27</i> S R <i>18</i> E/W	Range number
2. Distance and direction from nearest town or city: <i>2 W. 7 1/4 N. East onto field from</i> Street address of well location if in city: <i>Shrewsbury, Ks.</i>				3. Owner of well: <i>Dillas Hart</i> R.R. or street: <i>5105 east 21st St.</i> City, state, zip code: <i>Wichita, Ks 67202</i>		
4. Locate with "X" in section below: N W E S 1 Mile				6. Bore hole dia. <i>2 1/2</i> in. Completion date _____ Well depth <i>172</i> ft. <i>6-23-77</i>		
				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 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		
5. Type and color of material				9. Casing: Material <i>Steel</i> Height: Above or below Threaded _____ Welded <i>X</i> Surface <i>18</i> in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. <i>1 1/2</i> in. to <i>1 1/2</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <i>7</i>		
				10. Screen: Manufacturer's name _____ <i>Doerns</i> Type <i>Steel</i> Dia. <i>1 1/2</i> Slot/gauge <i>3/16</i> Length <i>80</i> Set between <i>92</i> ft. and <i>172</i> ft. _____ ft. and _____ ft. Gravel pack? <i>X</i> Size range of material <i>1/2 to 3/4</i>		
<i>Sandy top soil</i>				11. Static water level: _____ mo./day/yr. <i>37 1/2</i> ft. below land surface Date <i>3-18-77</i>		
<i>Clay</i>				12. Pumping level below land surfaces: <i>48</i> ft. after <i>1</i> hrs. pumping <i>600</i> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>1400</i> g.p.m.		
<i>Sand &amp; gravel</i>				13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <i>3-18-77</i>		
<i>Clay</i>				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade		
<i>Sand &amp; gravel clay mix</i>				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.		
<i>Sand &amp; gravel</i>				16. Nearest source of possible contamination: ft. <i>24</i> Direction <i>North</i> Type <i>septic</i> Well disinfected upon completion? <i>11/11</i> Yes <input type="checkbox"/> No		
<i>Clay</i>				17. Pump: _____ Not installed Manufacturer's name <i>Layne Bowler</i> Model number <i>6-10R4</i> HP <i>60</i> Volts _____ Length of drop pipe <i>100</i> ft. capacity <i>900</i> 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		
<i>Sand &amp; gravel</i>				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. <i>Roskowitz-Bemis 134</i> Business name _____ License No. _____ Address <i>Great Bend, Ks 67550</i> Signed <i>Andy Kilgus</i> Date <i>7-27-77</i> Authorized representative		
<i>Clay</i>						
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 27  
 R 18  
 E W  
 7  
 Sec  
 1/4 1/4 1/4 1/4  
 C SW

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

Form WWC-5