

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 1/4	Center 1/4 NW 1/4	Section number <b>7</b>	Township number T <b>27</b> S <b>18</b> E <b>W</b>	Range number <b>18</b>			
2. Distance and direction from nearest town or city: <b>9 miles Northwest of Greensburg, KS</b> Street address of well location if in city:				3. Owner of well: <b>Mid-America Land Co.</b> R.R. or street: <b>c/o Terry Gleason</b> City, state, zip code: <b>Casterline Irrigation Greensburg, KS 67054</b>					
4. Locate with "X" in section below:				Sketch map:		6. Bore hole dia. <u>24</u> in. Completion date <u>4-25-78</u> Well depth <u>145</u> ft.			
				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">7. <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug</td> <td style="width:50%;"></td> </tr> <tr> <td><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input checked="" type="checkbox"/> Reverse rotary</td> <td></td> </tr> </table>		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	
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<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>80</u> ft. depth Wall Thickness: inches or Dia. <u>16</u> in. to <u>125</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>			
<u>Top soil &amp; sandy clay</u>				<u>0</u>	<u>9</u>	Type <u>Double-slot</u> Dia. <u>16"</u> <u>Slot</u> gauze <u>1/8"</u> Length <u>60'</u>			
<u>Sand &amp; gravel</u>				<u>9</u>	<u>22</u>	Set between <u>80</u> ft. and <u>120</u> ft. <u>125</u> ft. and <u>145</u> ft.			
<u>Sandy clay &amp; gravel streaks</u>				<u>22</u>	<u>38</u>	Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>			
<u>Sand &amp; gravel &amp; clay streak</u>				<u>38</u>	<u>47</u>	11. Static water level: _____ mo./day/yr. <u>34</u> ft. below land surface Date <u>4-25-78</u>			
<u>Sand &amp; gravel</u>				<u>47</u>	<u>68</u>	12. Pumping level below land surfaces <u>Not Checked</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.			
<u>Brown &amp; gray clay</u>				<u>68</u>	<u>79</u>	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
<u>Sand &amp; gravel</u>				<u>79</u>	<u>91</u>	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade			
<u>Limestone &amp; clay &amp; gravel streaks</u>				<u>91</u>	<u>98</u>	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.			
<u>Sand &amp; gravel</u>				<u>98</u>	<u>116</u>	16. Nearest source of possible contamination: <u>FIELD</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<u>Brown &amp; white clay &amp; limestone</u>				<u>116</u>	<u>125</u>	17. Pump: _____ Not installed Manufacturer's name <u>Peerless Pump</u> Model number <u>12LB-2</u> HP <u>80</u> Volts <u>---</u> Length of drop pipe <u>70</u> ft. capacity <u>1000</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			
<u>Sand &amp; gravel</u>				<u>125</u>	<u>145</u>	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. <b>Clarke Well &amp; Eq., Inc. 185</b> Business name _____ License No. _____ Address <u>Great Bend, KS 67530</u> Signed <u>[Signature]</u> Date <u>5-5-78</u> Authorized representative			
18. Elevation:				19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley									

22  
18  
7  
CWC  
1/4  
1/4  
1/4

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

Form WWC-5