

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> Kiowa </u> Fraction <u> NW 1/4 SE 1/4 SE 1/4 </u> Section number <u> 19 </u> Township number <u> T 27 S </u> Range number <u> R 18 E/W </u>	
2. Distance and direction from nearest town or city: <u> 1 W 5 N Greensburg </u> Street address of well location if in city: <u> Kansas </u>	
3. Owner of well: <u> Earl Barnes </u> R.R., or street: _____ City, state, zip code: <u> Greensburg Kans 67054 </u>	
4. Locate with "X" in section below: Sketch map: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <p>1 Mile</p> <p>1 Mile</p> </div> </div>	
5. Type and color of material	
	From To
<u> Top Sand </u>	<u> 0 4 </u>
<u> Sandy Clay </u>	<u> 4 18 </u>
<u> Clay </u>	<u> 18 34 </u>
<u> Gravel </u>	<u> 34 55 </u>
<u> Clay </u>	<u> 55 56 </u>
<u> Gravel </u>	<u> 56 68 </u>
<u> Clay </u>	<u> 68 69 </u>
<u> Gravel </u>	<u> 69 80 </u>
(Use a second sheet if needed)	
6. Bore hole dia. <u> 8 3/4 </u> in. Completion date <u> 5-21-76 </u> Well depth <u> 80 </u> ft.	
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 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> PT </u> Height: Above or below Threaded <input type="checkbox"/> Welded <u> GT </u> Surface <u> 12 </u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u> 5 </u> in. to <u> 80 </u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u> 200 </u>	
10. Screen: Manufacturer's name <u> Sunflower Plastics </u> Type <u> RMP </u> Dia. <u> 5 </u> in. Slot/gauze <u> 1/8 </u> Length <u> 20 </u> ft. Set between <u> 60 </u> ft. and <u> 80 </u> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u> 1/4 X 1/2 </u>	
11. Static water level: _____ mo./day/yr. <u> 56 </u> ft. below land surface Date <u> 5-21-76 </u>	
12. Pumping level below land surfaces: <u> 56 </u> ft. after <u> 1 </u> hrs. pumping <u> 10 </u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u> 20 </u> g.p.m.	
13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
14. Well head completion: <input checked="" type="checkbox"/> 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> 3 </u> ft. to <u> 14 </u> ft.	
16. Nearest source of possible contamination ft. <u> 75 </u> Direction <u> SE </u> Type <u> Septic </u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: _____ Not installed <input type="checkbox"/> Manufacturer's name <u> FLUX WALLING </u> Model number <u> 18412 </u> HP <u> 3/4 </u> Volts <u> 230 </u> Length of drop pipe <u> 63 </u> ft. capacity <u> 10 </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:
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	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 Water Well Dr. 224 </u> Business name <u> Carl Hays Water Well Dr. </u> License No. _____ Address <u> 603 E. Maple Greensburg Kans </u> Signed <u> Carl Hays </u> Date <u> 5-21-76 </u> Authorized representative

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R
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1/4 1/4 1/4