

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>Hiowa</u> Fraction <u>SE 1/4 SE 1/4 NW 1/4</u> Section number <u>24</u> Township number T <u>27</u> S R <u>19</u> NW			
2. Distance and direction from nearest town or city: <u>5 N 2 W Greensburg</u> Street address of well location if in city: <u>Kansas</u>			
3. Owner of well: <u>Jesse Logan</u> R.R. or street: City, state, zip code: <u>Greensburg Kans</u>			
4. Locate with "X" in section below: Sketch map: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <p>N</p> <p>W E</p> <p>S</p> <p>1 Mile</p> </div> <div> <p>Bore hole dia. <u>18 7/8</u> in. Completion date: <u>3-28-78</u> Well depth <u>58</u> ft.</p> <p>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</p> <p>8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other</p> <p>9. Casing: Material <u>PI</u> Height: Above or below Threaded <input type="checkbox"/> Welded <u>GI</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>58</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>200</u></p> </div> </div>			
5. Type and color of material			
<u>Jandy loam</u>	From	To	
<u>Tan clay</u>	0	10	<u>Sunflower Plastics</u>
<u>Sand</u>	10	14	Type <u>RMP</u> Dia. <u>5"</u>
<u>Clay</u>	14	25	Slot gauze <u>18</u> Length <u>20</u>
<u>Gravel</u>	25	34	Set between <u>38</u> ft. and <u>58</u> ft.
	34	60	ft. and _____ ft.
			Gravel pack? <u>No</u> The range of material _____
			10. Screen Manufacturer's name _____
			11. Static water level: _____ mo./day/yr. <u>36</u> ft. below land surface Date <u>3-28-78</u>
			12. Pumping level below land surfaces: <u>36</u> ft. after <u>1</u> hrs. pumping <u>3</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 type="checkbox"/> Pitless adapter <u>12</u> Inches above grade
			15. Well grouted? <input checked="" type="checkbox"/> 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.
			16. Nearest source of possible contamination: ft. _____ Direction <u>East</u> Type <u>Stock</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			17. Pump: <u>8' Windmill</u> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe <u>45</u> ft. capacity <u>3</u> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
(Use a second sheet if needed)			
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. CARL HAYSE WATER WELL SERV. 224 Business name _____ License No. _____ <u>603 S. Maple, Greensburg, Kans.</u> Address _____ Signe <u>Carl Hayse</u> Date <u>3-28-78</u> Authorized representative
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			

27 19
 NW
 24
 SE
 NW
 1/4 1/4 1/4

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

Farm WWC-5