

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 SE 1/4 SW 1/4</b>	Section number <b>31</b>	Township number <b>T 27 S</b>	Range number <b>R 20 E</b>
2. Distance and direction from nearest town or city: <b>7 1/2 mi. Northwest of Mullenville, KS</b> Street address of well location if in city:				3. Owner of well: <b>Don Broomfield</b> R.R. or street: <b>Route 3</b> City, state, zip code: <b>Augusta, Kansas 67010</b>		
4. Locate with "X" in section below: <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center;"> <p>N</p> <p style="text-align: center;">S</p> </div> <div style="margin-left: 20px;"> <p>Sketch map:</p> </div> </div>			6. Bore hole dia. <u>24</u> in. Completion date <u>9-5-75</u> Well depth <u>52</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>26</u> ft. depth; Wall thickness: inches or Dia. <u>16</u> in. to <u>52</u> ft. depth; gage No. <u>7 ga.</u>			
5. Type and color of material				From	To	10. Screen: Manufacturer's name <u>Johnson Division</u>
Top soil & brown clay				0	7	Type <u>125 Irrigator</u> Dia. <u>16"</u>
Sand, gravel & thin clay streaks at 35'				7	46	Slot/gauge <u>1/8</u> Length <u>20'</u>
Brown clay & limestone				46	52	Set between <u>26</u> ft. and <u>46</u> ft. ft. and _____ ft.
						Gravel pack? <u>Yes</u> Size range of material <u>3/8-200</u>
						11. Static water level: _____ mo./day/yr. <u>23</u> ft. below land surface Date <u>9-5-75</u>
						12. Pumping level below land surfaces: <u>N/C</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ 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? <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.
						16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ <u>NONE KNOWN</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
						17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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
						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; Eq., Inc.</u> <u>185</u> Business name _____ License No. _____ Address <u>Great Bend, KS</u> Signed <u>[Signature]</u> <u>9-5-75</u> Authorized representative
18. Elevation:	19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

(Use a second sheet if needed)