

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>Shawnee</u>	Fraction <u>Center 1/4 SE 1/4</u>	Section number <u>29</u>	Township number <u>T 27 S</u>	Range number <u>R 27 E/W</u>																																																
2. Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well: <u>Hail Schroeder</u> R.R. or street: <u>1801 6th</u> City, state, zip code: <u>Dodge City, KS 67801</u>																																																		
4. Locate with "X" in section below: N W E S 1 Mile				Sketch map: 6. Bore hole dia. <u>2 1/2</u> in. Completion date _____ Well depth <u>234</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																																																		
5. Type and color of material				9. Casing: Material <u>STEEL</u> Height: <u>Above or below</u> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>8</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>22 1/2</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>188</u>																																																		
				10. Screen: Manufacturer's name <u>W.A. Brown</u> Type <u>Bridge</u> Dia. _____ Slot/gauze <u>1/8</u> Length _____ Set between <u>141</u> ft. and <u>221</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/2 down</u>																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr><td><u>Surface</u></td><td><u>0</u></td><td><u>2</u></td></tr> <tr><td><u>Clay</u></td><td><u>2</u></td><td><u>36</u></td></tr> <tr><td><u>Caliche clay & fine dry sand</u></td><td><u>36</u></td><td><u>56</u></td></tr> <tr><td><u>Chert sand</u></td><td><u>56</u></td><td><u>74</u></td></tr> <tr><td><u>med. fine sand</u></td><td><u>74</u></td><td><u>111</u></td></tr> <tr><td><u>Clay streaks & sand rock</u></td><td><u>111</u></td><td><u>117</u></td></tr> <tr><td><u>Sand rock layers</u></td><td><u>117</u></td><td><u>122</u></td></tr> <tr><td><u>Sand rock & clay layers</u></td><td><u>122</u></td><td><u>131</u></td></tr> <tr><td><u>Clay</u></td><td><u>131</u></td><td><u>148</u></td></tr> <tr><td><u>Sand & gravel</u></td><td><u>148</u></td><td><u>216</u></td></tr> <tr><td><u>Clay</u></td><td><u>216</u></td><td><u>227</u></td></tr> <tr><td><u>Caliche & clay</u></td><td><u>227</u></td><td><u>229</u></td></tr> <tr><td><u>Sand</u></td><td><u>229</u></td><td><u>231</u></td></tr> <tr><td><u>Yellow clay</u></td><td><u>231</u></td><td><u>233</u></td></tr> <tr><td><u>Shale</u></td><td><u>233</u></td><td><u>234</u></td></tr> </tbody> </table>					From	To	<u>Surface</u>	<u>0</u>	<u>2</u>	<u>Clay</u>	<u>2</u>	<u>36</u>	<u>Caliche clay & fine dry sand</u>	<u>36</u>	<u>56</u>	<u>Chert sand</u>	<u>56</u>	<u>74</u>	<u>med. fine sand</u>	<u>74</u>	<u>111</u>	<u>Clay streaks & sand rock</u>	<u>111</u>	<u>117</u>	<u>Sand rock layers</u>	<u>117</u>	<u>122</u>	<u>Sand rock & clay layers</u>	<u>122</u>	<u>131</u>	<u>Clay</u>	<u>131</u>	<u>148</u>	<u>Sand & gravel</u>	<u>148</u>	<u>216</u>	<u>Clay</u>	<u>216</u>	<u>227</u>	<u>Caliche & clay</u>	<u>227</u>	<u>229</u>	<u>Sand</u>	<u>229</u>	<u>231</u>	<u>Yellow clay</u>	<u>231</u>	<u>233</u>	<u>Shale</u>	<u>233</u>	<u>234</u>	11. Static water level: _____ mo./day/yr. <u>154</u> ft. below land surface Date <u>3/11/76</u>		
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				12. Pumping level below land surfaces: <u>27</u> ft. after <u>2</u> hrs. pumping <u>1400</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>1500</u> g.p.m.																																																		
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____																																																		
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade																																																		
				15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.																																																		
				16. Nearest source of possible contamination <u>NONE</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? _____ Yes _____ No																																																		
				17. Pump: _____ Not installed Manufacturer's name <u>Hydro</u> Model number _____ HP _____ Volts _____ Length of drop pipe <u>200</u> ft. capacity <u>1400</u> g.p.m. Type: _____ <input checked="" type="checkbox"/> Turbine _____ <input type="checkbox"/> Reciprocating _____ <input type="checkbox"/> Centrifugal _____ Other																																																		
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. <u>J. Johnson Drilling</u> <u>183</u> Business name _____ License No. _____ Address _____ Signed <u>Janice Alder</u> Date <u>6/26</u> Authorized representative																																																		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley																																																						

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

Form WWC-5