

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 KINGMAN	Fraction NW 1/4 SE 1/4 NW 1/4	Section number 20	Township number T 27 S	Range number R 8 W E/W
2. Distance and direction from nearest town or city: 5E 3S			3. Owner of well: TED McCLURE			
Street address of well location if in city: OF BENALUSA KS			R.R. or street: City, state, zip code: KINGMAN, KS			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 30 in. Completion date _____ Well depth 112 ft. 3 MAY 79		
				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		
5. Type and color of material				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 STL Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 16 in. to 63 ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. 188		
				10. Screens: Manufacturer's name WABLOWN & Johnson Type _____ Dia. 16" Slot/gauze 1/8 Length 30' Set between 63 ft. and 83 BRN ft. 102 ft. and 112 Johnson ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 X 3/4		
				11. Static water level: _____ mo./day/yr. 46.5 ft. below land surface Date 3 MAY 79		
				12. Pumping level below land surfaces: 64.5 ft. after 1 hrs. pumping 708 g.p.m. 63 ft. after 1 hrs. pumping 750 g.p.m. Estimated maximum yield 900 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 12 Inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
				16. Nearest source of possible contamination: NONE ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input 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		
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		<p>Concrete pad will be poured upon installation of pump</p>		<p>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Central Well & pump 325 Business name _____ License No. _____ Address Box 1032 Pratt KS Signed: Phonemehl Date _____ Authorized representative 15 MAY 79</p>		

27 - 8 W E
 20 NW SE NW
 Sec 1/4 1/4 1/4