

USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 826-1201-1215

Kansas Department of Health and Environment—Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:		County Kiowa	Fraction 1/4 1/4 CSW/4	Section number 2	Township number T 28 S R	Range number 16W E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well: Red Tiger Drlg Co. R.R. or street: 1720 Ks St Bldg City, state, zip code: Wichita, Ks.		
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>120</u> ft. <u>1-19-78</u>		
				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 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 checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
5. Type and color of material				9. Casing: Material _____ Height: Above _____ Threaded _____ Welded _____ Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>2.8</u> lbs./ft. Dia. <u>5</u> in. to <u>120</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>sch 40</u>		
				10. Screen: Manufacturer's name _____ Jetstream Type <u>pvc</u> Dia. <u>5"</u> Slot/gauze <u>1/32"</u> Length <u>40'</u> Set between <u>80</u> ft. and <u>120</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-3/4"</u>		
				11. Static water level: _____ mo./day/yr. <u>70</u> ft. below land surface Date <u>1-19-78</u>		
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>50</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 type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: _____ oil ft. <u>60</u> Direction <u>SW</u> Type <u>test</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Nat 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: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Kellys Waterwell Ser 186 Business name License No. _____ Address R2 Great Bend, Ks. Signed <u>Kelly Bruce</u> Date <u>8-29-79</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

28
 16W
 2
 CSW
 1/4 1/4 1/4
 Sec

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

Form WWC-5