

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<br><b>King</b> | Fraction<br>1/4 <b>CNW 1/4</b> 1/4 1/4                         | Section number<br><b>5</b> | Township number<br>T <b>28</b> S  | Range number<br>R <b>17</b> <b>EW</b> |
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city:   |  |                       | 3. Owner of well:<br>R.R. or street:<br>City, state, zip code: |                            |   |                                       |
| 2 1/4 E<br><b>Brenham</b>   |  |                       | <b>Gene Schmidt</b><br><b>Sterling, KS</b>                     |                            |   |                                       |
| 4. Locate with "X" in section below:  |  | Sketch map:           |  |                            | 6. Bore hole dia. <u>30</u> in. Completion date _____<br>Well depth <u>146</u> ft. <u>12-22-76</u>  |                                       |
|   |  |                       |  |                            | 7. <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><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<br><input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other  |                                       |
|   |  |                       |  |                            | 9. Casing: Material <u>Stl</u> Height: <u>above</u> or below<br>Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>24</u> in.<br>RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft.<br>Dia. <u>16</u> in. to <u>26</u> ft. depth Wall Thickness: inches or<br>Dia. _____ in. to _____ ft. depth gage No. <u>3/16"</u>   |                                       |
|   |  |                       |  |                            | 10. Screen: Manufacturer's name _____<br><u>Doerr</u><br>Type <u>Steel</u> Dia. <u>16"</u><br>Slot/gauze <u>1/8</u> Length <u>60</u><br>Set between <u>86</u> ft. and <u>146</u> ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8"-3/4"</u>  |                                       |
|   |  |                       |  |                            | 11. Static water level: _____ mo./day/yr.<br><u>62</u> ft. below land surface Date <u>12-22-76</u>  |                                       |
|   |  |                       |  |                            | 12. Pumping level below land surfaces:<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br><u>82</u> ft. after <u>4</u> hrs. pumping <u>1000</u> g.p.m.<br>Estimated maximum yield <u>1200</u> g.p.m.   |                                       |
|   |  |                       |  |                            | 13. Water sample submitted: _____ mo./day/yr.<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____   |                                       |
|   |  |                       |  |                            | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter <u>24</u> inches above grade  |                                       |
|   |  |                       |  |                            | 15. Well grouted? <input checked="" type="checkbox"/><br>With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <u>0</u> ft. to <u>10</u> ft.  |                                       |
|   |  |                       |  |                            | 16. Nearest source of possible contamination: <u>NONE</u><br>ft. _____ Direction _____ Type _____<br>Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>  |                                       |
|   |  |                       |  |                            | 17. Pump: _____ Not installed<br>Manufacturer's name <u>Howells</u><br>Model number <u>4125</u> HP <u>80</u> Volts _____<br>Length of drop pipe <u>130</u> ft. capacity <u>1000</u> g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |                                       |
| 18. Elevation:  |  | 19. Remarks:          |  |                            | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><u>Kelley Water Well Ser 186</u><br>Business name _____ License No. _____<br>Address <u>R2 Great Bend, KS</u><br>Signed <u>Kelley Paris</u> Date <u>2-25-77</u><br>Authorized representative   |                                       |
| Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input checked="" type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  |                       |  |                            |   |                                       |

T 28  
 R 17  
 E  
 S  
 C  
 NW  
 1/4  
 1/4  
 1/4

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

Form WWC-5