

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

Parmer #A-1

1. Location of well: County <i>Kiowa</i>		Fraction <i>C. NW 1/4 SW 1/4</i>		Section number <i>17</i>	Township number <i>T 28 S</i>	Range number <i>R 19 W</i>
2. Distance and direction from nearest town or city: <i>8 west 1 north Greensburg.</i>				3. Owner of well: <i>Dunne & Gardner</i> R.R. or street: <i>Wichita Kansas.</i> City, state, zip code:		
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile				Sketch map: 		
5. Type and color of material				From	To	6. Bore hole dia. <i>8</i> in. Completion date <i>1-27-78</i> Well depth <i>102</i> ft.
<i>Clay</i>				<i>0</i>	<i>40</i>	7. <input checked="" 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
<i>Sandy Clay</i>				<i>40</i>	<i>65</i>	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
<i>Dry gravel</i>				<i>65</i>	<i>102</i>	9. Casing: Material <i>Plastic</i> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>12</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <i>287.3</i> lbs./ft. Dia. <i>5</i> in. to <i>102</i> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <i>200</i>
						10. Screen: Manufacturer's name _____ Type <i>self made</i> Dia. <i>5</i> Cloth gauze <i>5</i> Length <i>20</i> Set between <i>82</i> ft. and <i>102</i> ft. _____ ft. and _____ ft. Gravel pack? <i>yes</i> Size range of material <i>5-7</i>
						11. Static water level: _____ mo./day/yr. <i>no water</i> ft. below land surface Date <i>1-27-78</i>
						12. Pumping level below land surfaces: _____ 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 _____ Inches above grade
						15. Well grouted? <i>yes</i> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>12</i> ft.
						16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input 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: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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. <i>Myers Water Well</i> Business name _____ License No. _____ Address <i>St. Bend Ks 143</i> Signed <i>A Myers</i> Date <i>1-27-78</i> Authorized representative			

T 28 S
R 19 W
E
1/4
1/4
1/4
1/4
SW

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

Form WWC-5