

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: kiowa	Fraction: SE 1/4 SE 1/4 SW 1/4	Section number: 32	Township number: T 28 S	Range number: R 19 W																		
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: Richard Vanson R.R. or street: City, state, zip code: Greensburg Kans																				
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. 8 3/4 in. Completion date 5-20-77 Well depth 140 ft.																				
			7. <input checked="" type="checkbox"/> Cable tool 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 checked="" 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 _____ Height: Above or below Threaded _____ Welded _____ Surface 20 in. RMP <input checked="" type="checkbox"/> PVC _____ Weight 1.5 lbs./ft. Dia. 5 in. to 140 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 200																				
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td>Top Soil</td> <td>0</td> <td>3</td> </tr> <tr> <td>Lt. BR Clay</td> <td>3</td> <td>67</td> </tr> <tr> <td>Sand</td> <td>67</td> <td>69</td> </tr> <tr> <td>Gray Clay</td> <td>69</td> <td>70</td> </tr> <tr> <td>Gravel</td> <td>70</td> <td>140</td> </tr> </tbody> </table>				From	To	Top Soil	0	3	Lt. BR Clay	3	67	Sand	67	69	Gray Clay	69	70	Gravel	70	140	10. Screen: Manufacturer's name: SunFloek Plastics Type RMP Dia. 5" Slot/gauze 1/8 Length 20' Set between 120 ft. and 140 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4" - 3/8"		
				From	To																		
Top Soil	0	3																					
Lt. BR Clay	3	67																					
Sand	67	69																					
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Gravel	70	140																					
			11. Static water level: _____ mo./day/yr. 125 ft. below land surface Date 5-20-77																				
			12. Pumping level below land surfaces: 125 ft. after 1 hrs. pumping 3 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 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 20 Inches above grade																				
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.																				
			16. Nearest source of possible contamination: ft. _____ Direction _____ Live stock Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No																				
			17. Pump: _____ Not installed Manufacturer's name: W. J. Mill Model number: 135 Length of drop pipe 35 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. Carl D. Hays Well Sewer 224 Business name: _____ License No. _____ Address: 6038 Maple Greensburg, KS Signed: Carl D. Hays Date: 5/20/77 Authorized Representative																			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley																							

T 28 S
 R 19 W
 Sec 32
 SE SE SE
 1/4 1/4 1/4

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

Form WWC-5