

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 Ford | Fraction C 1/4 NE 1/4 NE 1/4 | Section number 10 | Township number T 28 S | Range number R 21 E/W |
| 2. Distance and direction from nearest town or city: Mullinville | | 3. Owner of well: X plore shiley CO | | | |
| Street address of well location if in city: 8 mile west 3 north | | R.R. or street: 1320 off north line 2640 of | | | |
| 4. Locate with "X" in section below: | | Sketch map: EAST LINE | | 4. Bore hole dia. 8 in. Completion date _____ | |
| | | | | X Well depth 60 ft. 8-29-78 | |
| | | | | 7. Cable tool <input checked="" type="checkbox"/> Rotary _____ Driven _____ Dug _____ Hollow rod _____ Jetted _____ Bored _____ Reverse rotary _____ | |
| | | | | 8. Use: _____ Domestic _____ Public supply _____ Industry _____ Irrigation _____ Air conditioning _____ Stock _____ Lawn _____ Oil field water _____ Other _____ | |
| | | | | X Casing: Material RIC Weight: (Above or below) _____ Threaded _____ Welded <input checked="" type="checkbox"/> Surface 12 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 278-75 lbs./ft. Dia. 5 in. to 60 ft. depth Wall thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. 265 265 | |
| 5. Type and color of material | | From | To | 10. Screen: Manufacturer's name _____ SHOP MADE | |
| | | | | Type Saw Dia. 5 | |
| | | | | Slot/gauze 1/8 Length 20 | |
| | | | | Set between 60 ft. and 40 ft. _____ ft. and _____ ft. | |
| | | | | Gravel pack? yes Size range of material 48-1/4 | |
| | | | | 11. Static water level: _____ mo./day/yr. 23 ft. below land surface Date 8-29-78 | |
| | | | | 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. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____ | |
| | | | | 14. Well head completion: Pitless adapter 12 inches above grade | |
| | | | | 15. Well grouted? yes With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete _____ Depth: From 450 ft. to 300 ft. | |
| | | | | X Nearest source of possible contamination: ft. _____ Type _____ Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |
| | | | | X Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ 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. Myers Water Well 143 Business name License No. Address GREAT Bend KS Signed Floyd Rosen Dahl Date 8-29-78 Authorized representative | |
| Topography: Hill _____ Slope <input checked="" type="checkbox"/> _____ Upland _____ Valley _____ | | | | | |

28 210 10 C NE NE
 T 28 S R 21 E/W
 Sec 10