

USE TYPEWRITER OR BALL
POINT PEN - PRESS HARD -
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: <u>Grant</u> County, <u>NW 1/4 SW 1/4 SW 1/4</u> Section number <u>14</u> Township number <u>T 28 S R 37 E/W</u>	2. Distance and direction from nearest town or city: <u>1 east, 1 north</u> Street address of well location if in city: <u>Ulysses, Kansas</u>	3. Owner of well: <u>F, A. Schartz</u> R.R. or street: <u>RFD 1</u> City, state, zip code: <u>Ulysses, Ks. 67880</u>
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4. Locate with "X" in section below: Sketch map:

N

W E

S

1 Mile

6. Bore hole dia. 9.25 in. Completion date NA
Well depth 337 ft. 10-28-75

7. Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary

8. Use: Domestic Public supply Industry
 Irrigation Air conditioning Stock
 Lawn Oil field water Other

9. Casing: Material styrene (Above or below)
Threaded Welded Surface 12 in.
RMP PVC Weight _____ lbs./ft.
Dia. 5 in. to 297 ft. depth Wall Thickness: inches or
Dia. _____ in. to _____ ft. depth gage No. 0.320

5. Type and color of material	From	To
Surface	0	2
Fine sand	2	75
Brown clay w/fine sand strips	75	120
Blue clay w/fine sand strips	120	210
Blue & brown clay, lime, fine to coarse sand	210	335
Blue shale	335	337

10. Screen: Manufacturer's name Jess & Lowe
Type styrene Dia. 5 in.
Slot/gauze 1/16 Length 40
Set between 297 ft. and 337 ft.
ft. and _____ ft.
Gravel pack? Yes Size range of material No. 1

11. Static water level: _____ mo./day/yr.
218 ft. below land surface Date 10-20-75

12. Pumping level below land surfaces: NA
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield _____ g.p.m.

13. Water sample submitted: NA mo./day/yr.
 Yes No Date _____

14. Well head completion: NA
 Pitless adapter _____ inches above grade

15. Well grouted? NA
With: Neat cement Bentonite Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination: NA
ft. 200 Direction East Type Backyard
Well disinfected upon completion? Yes No

17. Pump: 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: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:
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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.
Houck Bros Drilg Co 164 License No. _____
Business name _____
Address Box 487, Ulysses, Ks.
Signed M. Beard Date 11-21-75
Authorized representative

28 370 14

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

Form WWC-5