

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 <b>Grant</b>		Fraction <b>SE 1/4 SE 1/4 SE 1/4</b>		Section number <b>9</b>		Township number <b>T 28 S R 37 E/W</b>		Range number	
2. Distance and direction from nearest town or city: <b>2 mi North</b>				3. Owner of well: <b>John Parker</b>					
Street address of well location if in city: <b>Ulysses, Ks. 67880</b>				R.R. or street: <b>Rt. # 3</b>					
				City, state, zip code: <b>Ulysses, Ks. 67880</b>					
4. Locate with "X" in section below:				Sketch map:		6. Bore hole dia. <del>5</del> <b>5</b> in? Completion date <b>11-1-77</b>			
						Well depth <b>480</b>			
						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			
						8. Use: <input checked="" 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other			
						9. Casing: Material <b>Styro</b> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>18</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>480</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>0320</b>			
5. Type and color of material				From		To		10. Screen: Manufacturer's name <b>Sunflower</b>	
<b>Surface + fine sand</b>				<b>0</b>		<b>20</b>		Mfg. <b>Compax</b>	
<b>Brown Clay</b>				<b>20</b>		<b>60</b>		Type <b>0320</b> Dia. <b>5"</b>	
<b>Fine Sand</b>				<b>60</b>		<b>80</b>		Slot/gauze <b>1/16</b> Length <b>80</b>	
<b>Brown Clay</b>				<b>80</b>		<b>120</b>		Set between <b>260</b> ft. and <b>280</b> ft.	
<b>Blue clay</b>				<b>120</b>		<b>200</b>		<b>360</b> ft. and <b>380</b> ft.	
<b>Sand</b>				<b>200</b>		<b>280</b>		Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8 - 1/4</b>	
<b>Brown clay</b>				<b>280</b>		<b>320</b>		11. Static water level: _____ mo./day/yr. <b>220</b> ft. below land surface Date <b>11-1-77</b>	
<b>Sand</b>				<b>320</b>		<b>340</b>		12. Pumping level below land surfaces: <b>NA</b> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
<b>Blue shale</b>				<b>340</b>		<b>440</b>		13. Water sample submitted: <b>NA</b> mo./day/yr. Yes <input type="checkbox"/> No <input type="checkbox"/> Date _____	
<b>Blue Shale + Dakota</b>				<b>440</b>		<b>480</b>		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>18</b> 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 <b>0</b> ft. to <b>20</b> ft.	
								16. Nearest source of possible contamination: ft. <b>100</b> Direction <b>East</b> Type <b>Septic Tank</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
								17. Pump: _____ Not installed Manufacturer's name <b>Gould</b> Model number <b>NA</b> HP <b>3</b> Volts <b>230</b> Length of drop pipe <b>315</b> ft. capacity <b>20</b> g.p.m. Type: <input checked="" 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:							
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		<b>Flat: Slab to be installed by owner.</b>							
		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. <b>Wagner Drlg. 253</b> Business name _____ License No. _____ Address <b>Ulysses, Ks. 67880</b> Signed <b>Debra Wagner</b> Date <b>11-10-77</b> Authorized representative							

T 28 S R 37 E/W  
 Sec 9  
 1/4 1/4 1/4 1/4

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

Form WWC-5