

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: <b>Grant</b>		Fraction <b>SE 1/4 SW 1/4 SE 1/4</b>	Section number <b>4</b>	Township number <b>T 28 S</b>	Range number <b>R 38 E/W</b>
2. Distance and direction from nearest town or city: <b>5 west, 4 north</b> <b>1 1/4 west of Ulysses, Ks.</b> Street address of well location if in city:			3. Owner of well: <b>Allen Williams</b> R.R. or street: <b>Ulysses, Kansas 67880</b> City, state, zip code:		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map:		6. Bore hole dia. <b>9 1/2</b> in. Completion date _____ Well depth <b>370</b> ft. <b>8-26-76</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>styrene</b> Height <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>310</b> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <b>.320</b>		10. Screen: Manufacturer's name _____ <b>Sunflower</b> Type <b>1 1/16 styrene</b> <b>5"</b> Slot/gauze <b>1/16</b> Length <b>60</b> Set between <b>310</b> ft. and <b>370</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>No. 1</b>	
5. Type and color of material		From	To	11. Static water level: _____ mo./day/yr. <b>290</b> ft. below land surface Date <b>8-19-76</b>	
Surface		0	2	12. Pumping level below land surfaces: <b>301</b> ft. after <b>10</b> hrs. pumping <b>20</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>20</b> g.p.m.	
Sandy clay and clay strips		2	63	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
Brown clay		63	198	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>10</b> inches above grade	
Blue clay		198	220	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.	
Brown clay, lime and sand		220	243	16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Sand w/clay strips		243	370	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)				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>Houck Bros. Drilling co. 164</b> Business name _____ License No. _____ Address <b>Box 487, Ulysses, Ks.</b> Signed <b>M. Beard</b> Date <b>11-10-76</b> Authorized representative	
18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: <b>Well for a new trailer house to be moved in.</b>			

T 28 S R 38 E 1/4 SE 1/4 SW 1/4 SE

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

Form WWC-5