

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 NE 1/4 1/4 1/4	Section number 12	Township number T 29 S R 17	Range number 17	RW
2. Distance and direction from nearest town or city: 5 miles S. & 1 1/4 miles W. of Haviland, Ks Street address of well location if in city:				3. Owner of well: Bill Wirth R.R. or street: Haviland, Kansas City, state, zip code:			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: Well No. 1 (TH 1-76)		6. Bore hole dia. 30 in. Completion date _____ Well depth 106 ft. 3/15/76		
5. Type and color of material			From	To	7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
Soil				0	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		
Fine sand w/gypsum streaks				2	9. Casing: Material Stl Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface 12 in. RMP _____ PVC _____ Weight 36.91 lbs./ft. Dia. 16 in. to 70 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 219		
Med. to coarse sand & gravel				10	10. Screen: Manufacturer's name Doerr Metal Products Type Stl Dia. 16" Slot/gauze 1/8" Length 36' Set between 70 ft. and 106 ft. ft. and _____ ft. Gravel pack? yes Size range of material 1/2 x 1/4		
Cemented sand w/clay streaks				17	11. Static water level: _____ mo./day/yr. 35.6 ft. below land surface Date 5/7/76		
Med. to coarse sand & gravel				23	12. Pumping level below land surfaces: 64.4 ft. after 3 hrs. pumping 800 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 900 g.p.m.		
Med. to coarse sand & gravel w/rock				30	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
Fine to coarse sand				60	14. Well head completion: Steel Plate <input type="checkbox"/> Pitless adapter 12 inches above grade		
Med. to coarse sand & med-coarse gravel				65	15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
Coarse sand & gravel w/med. rock				95	16. Nearest source of possible contamination: ft. 1320 Direction N Type Farm Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Med. to coarse sand & med.-coarse rock				100	17. Pump: _____ Not installed Manufacturer's name WellLine Model number 77138WL HP 80 Volts _____ Length of drop pipe 80 ft. capacity 800 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
Tan clay				105	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. Layne Western Co. 102 Business name _____ License No. _____ Address 1011 W. Harry Widita Signed _____ Date _____ Authorized representative		
(Use a second sheet if needed)							
18. Elevation:		19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley							

T 29 S R 17
 W E
 12
 C N E
 1/4 1/4

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

Form WWC-5