

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>Gray</b>	Fraction <b>NE 1/4 NW 1/4 NW 1/4</b>	Section number <b>20</b>	Township number <b>T 29</b>	Range number <b>S R 28</b>	<b>E/W</b>
2. Distance and direction from nearest town or city: <b>10 south of Montezuma, Kansas</b>			3. Owner of well: <b>Alma Dirks</b>			
Street address of well location if in city:			R.R. or street: <b>RFD</b>			
			City, state, zip code: <b>Montezuma, Kansas 67867</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>9 7/8</b> in. Completion date _____		
N		W		Well depth <b>168</b> ft. <del>XXXXXX</del> <b>8-04-77</b>		
E		S		7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug		
1 Mile		1 Mile		<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
1 Mile		1 Mile		8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry		
1 Mile		1 Mile		<input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock		
1 Mile		1 Mile		<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
1 Mile		1 Mile		9. Casing: Material <b>PVC</b> Height: Above or <u>below</u>		
1 Mile		1 Mile		Threaded _____ Welded <input checked="" type="checkbox"/> Surface <b>12</b> in.		
1 Mile		1 Mile		RMP _____ PVC <input checked="" type="checkbox"/> Weight <b>2.8</b> lbs./ft.		
1 Mile		1 Mile		Dia. <b>5</b> in. to <b>168</b> ft. depth; Wall Thickness: inches or		
1 Mile		1 Mile		Dia. _____ in. to _____ ft. depth; gage No. <b>265</b>		
5. Type and color of material			From	To	10. Screen: Manufacturer's name _____	
Top soil			0	5	<b>Jess &amp; Lowell</b>	
Sandy clay			5	32	Type <b>PVC</b> Dia. <b>8 5/8"</b>	
Fine sand			32	64	Slot/gauge <b>1/8"</b> Length <b>60'</b>	
Med. to lar. sand			64	94	Set between <b>168</b> ft. and <b>108</b> ft.	
Sandy clay			94	125	_____ ft. and _____ ft.	
Clay (Yellow)			125	137	Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <b>1/64-5/32</b>	
Sandy clay			137	168	11. Static water level: _____ mo./day/yr.	
Black shale			168	170	<b>93</b> ft. below land surface Date <b>7/13/77</b>	
					12. Pumping level below land surfaces:	
					_____ ft. after _____ hrs. pumping _____ g.p.m.	
					_____ ft. after _____ hrs. pumping _____ g.p.m.	
					Estimated maximum yield <b>7.5</b> g.p.m.	
					13. Water sample submitted: _____ mo./day/yr.	
					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
					14. Well head completion:	
					<input checked="" type="checkbox"/> Pitless adapter Unit _____ Inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> Yes	
					With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete	
					Depth: From <b>4</b> ft. to <b>14</b> ft.	
					16. Nearest source of possible contamination:	
					ft. <b>10</b> Direction <b>NW</b> Type <b>old well</b>	
					Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: _____ Not installed	
					Manufacturer's name <b>Aermotor</b>	
					Model number <b>SD5</b> HP <b>1/2</b> Volts <b>220</b>	
					Length of drop pipe <b>164</b> ft. capacity <b>5</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	
					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>Friesen Windmill</b> <b>252</b>	
					Business name _____ License No. _____	
					Address <b>Meade, Kansas 67864</b>	
					Signed <b>John Dirks</b> Date <b>8-26-77</b>	
					Authorized representative	
18. Elevation:			19. Remarks:			
Topography:			<b>#16 old well is capped only for possible future use</b>			
<input type="checkbox"/> Hill						
<input type="checkbox"/> Slope						
<input checked="" type="checkbox"/> Upland						
<input type="checkbox"/> Valley						

T 29 R 28 S 20 NE 1/4 1/4 1/4

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

Form WWC-5