

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>SE 1/4 NE 1/4 SE 1/4</b>	Section number <b>8</b>	Township number <b>T 29 S R 30</b>	Range number <b>30</b>				
2. Distance and direction from nearest town or city: <b>half mile east and 2 blocks south of</b> Street address of well location if in city: <b>Copeland</b>			3. Owner of well: <b>Bert Rodgers</b> R.R. or street: <b>2804 Derends Drive</b> City, state, zip code: <b>Hutchinson, Kansas 67501</b>						
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile W <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table> E S 1 Mile</div>			NW	NE	SW	SE	Sketch map: <div style="text-align: center;"></div>		
NW	NE								
SW	SE								
5. Type and color of material			6. Bore hole dia. _____ in. Completion date <b>6-2-76</b> Well depth <b>375</b> ft.						
Topsoil & clay			7. Cable tool _____ Rotary _____ Driven _____ Dug _____ Hollow rod _____ Jetted _____ Bored <input checked="" type="checkbox"/> Reverse rotary						
Clay & Little Lime			8. Use: Domestic _____ Public supply _____ Industry _____ <input checked="" type="checkbox"/> Irrigation _____ Air conditioning _____ Stock _____ Lawn _____ Oil field water _____ Other _____						
Sand			9. Casing: Material <b>Steel</b> Height: Above or below _____ Threaded _____ Welded <input checked="" type="checkbox"/> Surface <b>12"</b> in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. _____						
Clay & Little Lime			10. Screen: Manufacturer's name _____ <b>W. A. Brown Ent.</b> Type <b>Bridge</b> Dia. <b>16"</b> Slot/gauze <b>Slot</b> Length <b>2"</b> Set between <b>275</b> ft. and <b>375</b> ft. _____ ft. and _____ ft. Gravel pack? <b>Yes</b> Size range of material <b>5/8</b>						
Sand & little clay			11. Static water level: _____ mo./day/yr. <b>145</b> ft. below land surface Date <b>6-21-76</b>						
Clay			12. Pumping level below land surfaces: <b>Not Test</b> Pumped _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.						
Sand & clay			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____						
Gum Clay & Little cemented sand			14. Well head completion: _____ Pitless adapter <b>12</b> inches above grade						
Sand & little cemented sand			15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <b>0</b> ft. to <b>10</b> ft.						
Coarse sand and little cemented sand			16. Nearest source of possible contamination: <b>None</b> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____						
Sand			17. Pump: _____ Not installed Manufacturer's name <b>KKK Winthroath</b> Model number <b>1954</b> HP <b>125</b> Volts _____ Length of drop pipe <b>290</b> ft. capacity <b>1280</b> g.p.m. Type: _____ _____ Submersible <input checked="" type="checkbox"/> Turbine _____ _____ Jet _____ Reciprocating _____ _____ Centrifugal _____ Other _____						
Very hard cemented sand			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>Dunham Drilling Co.</b> <b>223</b> Business name _____ License No. _____ Address <b>Copeland, Kansas</b> Signed <b>Don Dunham</b> Date <b>7-2-76</b> Authorized representative						
Little Fine Sand									
Lime & clay									
Sand & clay									
Very hard cemented sand									
Gum Clay									
Very hard lime									
Sand & little cemented sand									
Clay									
Sand & Clay									
Gum Clay & blue (Use a second sheet if needed)									
18. Elevation:		19. Remarks: <b>Machined Levelled</b>							
Topography: _____ Hill <input checked="" type="checkbox"/> Slope _____ Upland _____ Valley									

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

Form WWC-5