

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 Grant	Fraction SW 1/4 NW 1/4 NE 1/4	Section number 21	Township number T 29 S R 38	Range number 38
2. Distance and direction from nearest town or city: Station at Ulysses, 5 miles west, 4 south Street address of well location if in city: 1 1/2 west			3. Owner of well: Kenneth Siebert R.R. or street: RFD 1 City, state, zip code: Ulysses, Ks., 67880		
4. Locate with "X" in section below: <div style="text-align: center;"> </div>			6. Bore hole dia. <u>27</u> in. Completion date <u>8-16-77</u> Well depth <u>455</u> ft.		
5. Type and color of material			7. <input 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 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			9. Casing: Material <u>steel</u> Height: <u>(Above)</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>16</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>36.8</u> lbs./ft. Dia. <u>16</u> in. to <u>235.3</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>.219</u>		
10. Screen: Manufacturer's name Lakewood Pipe of Texas			11. Static water level: <u> </u> mo./day/yr. <u>127.6</u> ft. below land surface Date <u>7-7-77</u>		
11. <u>Surface</u>			12. Pumping level below land surfaces: <u>300</u> ft. after <u>24</u> hrs. pumping <u>950</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>1200</u> g.p.m.		
12. <u>Brown sandy clay & lime shells</u>			13. Water sample submitted: <u> </u> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u> </u>		
13. <u>Brown clay, fine to medium sand strips</u>			14. Well head completion: <u>16</u> inches above grade <input type="checkbox"/> Pitless adapter		
14. <u>Brown clay</u>			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
15. <u>Fine to coarse sand w/clay breakers</u>			16. Nearest source of possible contamination: <u>field</u> ft. <u> </u> Direction <u> </u> Type <u>field</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
16. <u>Brown & gray clay, fine sand strips</u>			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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		
17. <u>Fine sand, some medium clay breakers</u>			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. Houck Bros. Drilling Co. 164 Business name <u> </u> License No. <u> </u> Address <u>Box 487, Ulysses, Ks. 67880</u> Signed <u>M. Beard</u> Date <u>9-23-77</u> Authorized representative		
18. Elevation:			19. Remarks:		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			(Use a second sheet if needed)		

29
 38
 21
 SKOWNE
 1/4
 1/4
 1/4

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

Form WWC-5