

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 SE 1/4 SE 1/4 SW 1/4	Section number 2	Township number T 30 S R 20	Range number X/W
2. Distance and direction from nearest town or city: 9 south, 1/2 west			3. Owner of well: Max Seacat (Steve Kirk)			
Street address of well location if in city:			R.R. or street: Greensburg, Kansas (Mullinville, Ks.)			
City, state, zip code:			City, state, zip code:			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 7/8 in. Completion date _____ Well depth 190 ft. XX-10-27-75		
		<p>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</p> <p>8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stack <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other</p> <p>9. Casing: Material RMP Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface 24 in. RMP _____ PVC _____ Weight 220 lbs./ft. Dia. 5 in. to 190 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 320</p>		10. Screen: Manufacturer's name _____ Jess & Lowell Type RMP Dia. 5" Slot/gauze 1/8" Length 40' Set between 130 ft. and 190 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/16"		
				11. Static water level: _____ mo./day/yr. 122 ft. below land surface Date 10/29/75		
5. Type and color of material		From	To	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 15 g.p.m.		
Top Soil		0	3	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
Tan clay with streaks of limestone		3	62	14. Well head completion: <input type="checkbox"/> Pitless adapter 18 inches above grade		
Fine sand		62	85	15. Well grouted? <input checked="" type="checkbox"/> yes With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
Sandy clay		85	130	16. Nearest source of possible contamination: none ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No		
Clay streaks & med. to lar. sand		130	145	17. Pump: _____ Not installed Manufacturer's name 10' Aeromotor Windmill Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity 3 g.p.m. Type: <input type="checkbox"/> Submersible _____ Turbine <input type="checkbox"/> Jet _____ Reciprocating <input type="checkbox"/> Centrifugal <input checked="" type="checkbox"/> Other		
Clay with gravel streaks		145	192	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. Friesen Windmill 252 Business name _____ License No. _____ Address Meade, Kansas 67864 Signed <i>[Signature]</i> Date 10-27-75 Authorized representative		
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5