

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 1/4 SE 1/4 SE 1/4	Section number 15	Township number T 30 S R 20 E W	Range number 20
2. Distance and direction from nearest town or city: 11 miles South of Mullenville, KS Street address of well location if in city:				3. Owner of well: Wayne Bremsing (?) R.R. or street: City, state, zip code: Mullenville, KS 67109		
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. <u>9</u> in. Completion date <u>4-14-77</u> Well depth <u>106</u> ft.		
				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		
				8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input 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		
5. Type and color of material				9. Casing: Material <u>Styrene</u> Height: <u>Above</u> or below Threading: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>1.5</u> lbs./ft. Dia. <u>5</u> in. to <u>85</u> ft. depth Wall Thickness: <u>inches</u> or Dia. <u>in.</u> to <u>ft.</u> depth gage No. <u>200#</u>		
				10. Screen: Manufacturer's name <u>Jess & Lowell</u> Type <u>Styrene 200</u> Dia. <u>5"</u> <u>Slot</u> gauze <u>1/8</u> Length <u>21'</u> Set between <u>85</u> ft. and <u>106</u> ft. Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>		
Top soil				11. Static water level: <u>78</u> ft. below land surface Date <u>4-14-77</u>		
Brown clay & limestone				12. Pumping level below land surfaces: <u>N/C</u> <u>ft.</u> after <u>hrs.</u> pumping <u>g.p.m.</u> <u>ft.</u> after <u>hrs.</u> pumping <u>g.p.m.</u> Estimated maximum yield <u>g.p.m.</u>		
Sand & gravel				13. Water sample submitted: <u>mo./day/yr.</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>		
Brown clay & limestone				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade		
Sand & gravel				15. Well grouted? <u>yes</u> 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.		
Yellow clay				16. Nearest source of possible contamination: <u>Field</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				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		
(Use a second sheet if needed)				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. Clarke Well & Equip., Inc. 185 Business name <u> </u> License No. <u> </u> Address <u>Great Bend, KS 67530</u> Signed <u> </u> Date <u>4-21-</u> Authorized representative		
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 30 S R 20 E W
 Sec 15
 1/4 SE 1/4 SE 1/4

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

Form WWC-5