

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>KIOWA</b>	Fraction <b>1/4 CN 1/4 NE 1/4</b>	Section number <b>16</b>	Township number <b>T 30</b>	Range number <b>S R 20 E/W</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:		<b>10 S 2 1/2 W</b> <b>Mullinville KS</b>		3. Owner of well: R.R. or street: City, state, zip code:		
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. <u>7</u> in. Completion date <u>11-21-75</u> Well depth <u>140</u> ft.		
				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 type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
5. Type and color of material				9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>2</u> lbs./ft. Dia. <u>4</u> in. to <u>140</u> ft. depth Wall Thickness: inches or Dia. <u>  </u> in. to <u>  </u> ft. depth Case No. <u>SCA 40</u>		
				10. Screen: Manufacturer's name <u>MPI</u> Type <u>PVC</u> Dia. <u>4"</u> Slot/gauze <u>1/8"</u> Length <u>40'</u> Set between <u>100</u> ft. and <u>140</u> ft. ft. and <u>  </u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8"-3/4"</u>		
<b>Top Soil - Clay</b>				11. Static water level: _____ mo./day/yr. <u>60</u> ft. below land surface Date <u>11-21-75</u>		
<b>Sandy Clay</b>				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>40</u> g.p.m.		
<b>Sand</b>				13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
<b>Sand-Gravel-clay</b>				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: ft. <u>60</u> Direction <u>SE</u> Type <u>Oil Test</u> Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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		
				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. <u>Kelly's Water Well Ser 186</u> Business name _____ License No. _____ Address <u>R2 Great Bend, KS</u> Signed <u>Kelly Price</u> Date <u>11-21-75</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						

T 30  
 R 20  
 S 16  
 C 1/4 NE 1/4

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

Form WWC-5