

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 <u>MEADE</u>		Fraction <u>NE 1/4 NW 1/4 SW 1/4</u>		Section number <u>38</u>		Township number <u>T 30 S</u>		Range number <u>R 29 E/W</u>	
2. Distance and direction from nearest town or city: <u>11 North 9 West of Meade Kan</u>				3. Owner of well: <u>WADE BERRY MAN</u>					
Street address of well location if in city:				R.R. or street:					
				City, state, zip code: <u>MEADE KANSAS - 67264</u>					
4. Locate with "X" in section below:				Sketch map:		6. Bore hole dia. <u>16</u> in. Completion date <u>7-3-76</u>			
						Well depth <u>405</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					
5. Type and color of material				From		To		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: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>36.87</u> lbs./ft. Dia. <u>16</u> in. to <u>405</u> ft. depth Wall Thickness: inches or Dia. <u>16</u> in. to <u>405</u> ft. depth gage No. <u>219</u>	
<u>FINE TO MED SAND & CLAY STKS</u>				<u>160</u>		<u>180</u>		10. Screens: Manufacturer's name <u>BROWN ENTERPRISES</u>	
<u>MED SAND & CLAY STKS</u>				<u>180</u>		<u>200</u>		Type <u>1/8</u> Dia. <u>16"</u>	
<u>MED SAND & CLAY STKS</u>				<u>200</u>		<u>220</u>		Slot/gauze <u>1/8</u> Length <u>205</u>	
<u>MED TO COARSE SAND & CLAY STKS</u>				<u>220</u>		<u>240</u>		Set between <u>200</u> ft. and <u>405</u> ft.	
<u>MED TO COARSE SAND</u>				<u>240</u>		<u>260</u>		<u>34</u> ft. and <u>34</u> ft.	
<u>MED TO COARSE SAND</u>				<u>260</u>		<u>280</u>		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 1/2 1/4</u>	
<u>MED TO COARSE SAND</u>				<u>280</u>		<u>300</u>		11. Static water level: _____ mo./day/yr. <u>110</u> ft. below land surface Date <u>7-3-76</u>	
<u>COARSE SAND & CLAY STKS</u>				<u>300</u>		<u>320</u>		12. Pumping level below land surfaces: <u>N/O TEST</u>	
<u>COARSE SAND & CLAY STKS</u>				<u>320</u>		<u>340</u>		_____ ft. after _____ hrs. pumping _____ g.p.m.	
<u>COARSE SAND</u>				<u>340</u>		<u>360</u>		_____ ft. after _____ hrs. pumping _____ g.p.m.	
<u>COARSE SAND</u>				<u>360</u>		<u>380</u>		Estimated maximum yield <u>2000</u> g.p.m.	
<u>COARSE SAND</u>				<u>380</u>		<u>400</u>		13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
<u>MED COARSE SAND & CLAY</u>				<u>400</u>		<u>420</u>		14. Well head completion: _____ Pitless adapter <u>12</u> inches above grade	
								15. Well grouted? <u>YES</u>	
								With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete	
								Depth: From <u>surface</u> to <u>12</u> ft.	
								16. Nearest source of possible contamination: <u>NONE</u>	
								ft. _____ Direction _____ Type _____	
								Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
								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 checked="" 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.	
18. Elevation:				19. Remarks: <u>TOP COMPLETED BY CUSTOMER</u>				<u>Allen + Rawlings</u> <u>322</u>	
Topography:								Business name _____ License No. _____	
<input type="checkbox"/> Hill								Address <u>Box 130 Meade</u>	
<input checked="" type="checkbox"/> Slope								Signed <u>Robert Rawlings</u> Date <u>7-10-76</u>	
<input type="checkbox"/> Upland								Authorized representative	
<input type="checkbox"/> Valley									

T 30 S
 R 29 E
 Sec 38
 NW 1/4 SW 1/4

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

Form WWC-5