

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County MEADE	Township name	Fraction SE 1/4 SE 1/4 NE 1/4	Section number 36	Town number T30S	Range number R30W
Distance and direction from nearest town or city: From Plains, KS. 8N 3E 1/2 N			3 Owner of well: A.C. Yearick			
Street address of well location if in city:			Address: RR PLAINS, KANSAS 67869			
Locate with "X" in section below:		Sketch map:		4 Well depth: 421 ft. Date of completion 1-20-76 Well diameter 28 in.		
				5 <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		
				6 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"/> Commercial <input type="checkbox"/> Test well		
2		Type and color of material		From To		7 Casing: Material STEEL Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. Diam. _____ Weight _____ lbs./ft. _____ 16 in. to 200 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth
						8 Screen: Manufacturer W.A. BROWN Type Puncher Dia. _____ Slot/gauge 6/32 Length 821 Set between 200 ft. and 421 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____
						9 Static water level: 186 ft. below land surface Date 1-23-76
						10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
						11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
						12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> _____ Inches above grade
						13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 6 ft. to 18 ft.
						14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
						15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Weatherington Model number 15L154 HP _____ Volts _____ Length of drop pipe 260 ft. capacity 200 g.m.p. 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
16 Remarks: elevation Customer powered Slab						17 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. Jones Drilling Co 257 Business name License No. Address P.O. Box 187 Liberal, KS. Signed Tom Jones Date 1-11-76 Authorized representative
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

30 30W 36 SESESE

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5