

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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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 Sumner	Fraction SW 1/4 SW 1/4 SW 1/4	Section number 2	Township number T 30 S	Range number R 4 E
2. Distance and direction from nearest town or city: Street address of well location if in city: Suppesville				3. Owner of well: Clifford Gregory R.R. or street: Suppesville City, state, zip code: Kans		
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. 8 in. Completion date 8/15/77 Well depth 33 ft.	
					7. <input checked="" 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 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
BLACK CLAY		0		5		9. Casing: Material STEEL Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 100 lbs./ft. Dia. 5 in. to 33 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 100
RED CLAY		5		20		10. Screen: Manufacturer's name SUN FLOW BE Type 100 Dia. 5 Slot/gauze SLOT Length 5 Set between 28 ft. and 33 ft. Gravel pack? NO Size range of material 1/4"
RED SAND		20		25		11. Static water level: 20 ft. below land surface Date 8/15/77
RED CLAY		25		30		12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.
RED SAND		30		33		13. Water sample submitted: _____ mg./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date 8/15/77
						14. Well head completion: _____ Pitless adapter 12 Inches above grade
						15. Well grouted? YES With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.
						16. Nearest source of possible contamination: ft. 5 Direction SOUTH Type SEWER Well disinfected upon completion? <input checked="" 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 type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
18. Elevation:		19. Remarks:		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. Jeff Whelling 313 Business name 257 N. Selma License No. _____ Address Wagoner Date 8/15/77 Signed _____ Authorized representative		

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

Form WWC-5