

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 BARBER	Fraction NW 1/4 NE 1/4 SE 1/4	Section number 25	Township number T 31 S	Range number R 13 W E/W
2. Distance and direction from nearest town or city: 5 W & 3 N OF			3. Owner of well: Dale Clark			
Street address of well location if in city: MEDICINE LODGE			R.R. or street: City, state, zip code: Medicine Lodge, Ks			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 30 in. Completion date 5 AUG 77 Well depth 60 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		
5. Type and color of material				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 STL Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 1 1/2 in. to 60 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 188		
				10. Screen: Manufacturer's name WA Brown Type Fleethor Dia. 16" Slot/gauze 48 Length 30' Set between 30 ft. and 60 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 8X1/2		
				11. Static water level: <input type="checkbox"/> mo./day/yr. 7.5 ft. below land surface Date 5 AUG 77		
				12. Pumping level below land surfaces: 30 ft. after 1 hrs. pumping 300 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 300 g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter 12 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 0 ft. to 10 ft.		
				16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type NONE Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Summers Model number <input type="checkbox"/> HP 20 Volts 460 Length of drop pipe 50 ft. capacity 300 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		
				(Use a second sheet if needed)		
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		3'x3'x8" slab at surface		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Central well & pump 325 Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address 121 S Taylor Pratt Signed Robertson Date 20 Aug 78 Authorized representative		

T 31
 R 13 W
 Sec 25
 NW 1/4 SE

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

Form WWC-5