

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 Comanche	Fraction SW NE SW 1/4 1/4 NE 1/4	Section number 33	Township number T 31 S R	Range number 19 E/W
2. Distance and direction from nearest town or city: 5 miles South of Comanche County line on Hwy. 183 go 3 1/2 West, Street address of well location if in city: 1/4 Southeast			3. Owner of well: Harold Ellis R.R. or street: City, state, zip code: Coldwater, KS 67029		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: NE 1/4 of Sec. 33, T31S, R19W, Comanche County, Kansas.		6. Bore hole dia. <u>28</u> in. Completion date _____ Well depth <u>218</u> ft. May 30, 1979	
5. Type and color of material		From		To	
		Surface and fine sand		0 12	
		Brown clay		12 21	
		Fine to medium sand		21 68	
		Brown clay		68 92	
		Fine to medium sand		92 110	
		Fine to medium sand with few clay streaks		110 125	
		Fine to medium sand		125 147	
		Brown clay		147 162	
		Fine to medium sand with very few clay streaks		162 190	
Fine to medium sand, clean		190 217			
Red bed		217 230		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 checked="" type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
				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>Stl</u> Height: <u>Above</u> 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>37</u> lbs./ft. Dia. <u>16</u> in. to <u>130</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>.219</u>	
				10. Screen: Manufacturer's name <u>Cook/Doerr</u> Type <u>W/W, Louver</u> Dia. <u>16"</u> Slot/gauze <u>1/8"</u> Length <u>188</u> Set between <u>130</u> ft. and <u>218</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>2.8 mm</u>	
				11. Static water level: _____ mo./day/yr. <u>83</u> ft. below land surface Date <u>3-16-79</u>	
				12. Pumping level below land surfaces: <u>28</u> ft. after <u>1</u> hrs. pumping <u>963</u> g.p.m. <u>124</u> ft. after <u>2</u> hrs. pumping <u>818</u> g.p.m. Estimated maximum yield <u>1000</u> g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> Yes 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 <u>Unknown</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: _____ Not installed Manufacturer's name <u>Layne & Bowler</u> Model number <u>12KH</u> HP <u>80</u> Volts _____ Length of drop pipe <u>180</u> ft. capacity <u>900</u> 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	
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. <u>Layne-Western Co., Inc.</u> 102 Business name License No. Address <u>Garden City, KS 67846</u> Signed <u>[Signature]</u> Date <u>7-18-79</u> Authorized representative	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)			

31 19 33
T R Sec
1/4 1/4 1/4

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

Form WWC-5