

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

No. 3

1. Location of well: County **Seward** Fraction **SE 1/4 SW 1/4 NW 1/4** Section number **16** Township number **T 31 S R 34** Range number **34** EW

2. Distance and direction from nearest town or city: **5S, 2 1/2 W, 1 1/2 S of Satanta** Street address of well location if in city: _____

3. Owner of well: **Chuck Conover** R.R. or street: _____ City, state, zip code: **Satanta, Kansas**

4. Locate with "X" in section below: Sketch map:

6. Bore hole dia. **9 7/8** Completion date _____ Well depth ~~102~~ **203** **5-23-79**

7. Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary

8. Use: Domestic Public supply Industry Irrigation Air conditioning Stock Lawn Oil field water Other

9. Casing: Material **PVC** Height: Above or _____ Threading: Threaded Welded Surface **12** in. RMP: PVC Weight **2.8** lbs./ft. Dia. **5** in. to **203** ft. depth Wall thickness _____ inches or _____ Dia. _____ in. to _____ ft. depth gage No. **265**

5. Type and color of material	From	To
Fine Sand	0	10
Med. to Lar. Sand gravel some clay streaks	10	105
Med. to Lar. Sand	105	200
Med. to Lar. Sand with clay	200	208
WD-203'		

10. Screen: Manufacturer's name **Pumpco** Type **PVC** Dia. **5"** Slot/gauze **1/8"** Length **60'** Set between **143** ft. and **203** ft. Gravel pack? Yes Size range of material **#1 Fine**

11. Static water level: **47** ft. below land surface Date **4/24/79** **me./day/yr.**

12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.

13. Water sample submitted: Yes No Date **4/24/79** **me./day/yr.**

14. Well head completion: Pitless adapter **18** Inches above grade

15. Well grouted? **Yes** With: Neap cement Bentonite Concrete Depth: From **0** ft. to **10** ft.

16. Nearest source of possible contamination: ft. **10** Direction **NE** Type **old well** Well disinfected upon completion? Yes No

17. Pump: Not installed Manufacturer's name **Customers Tower** Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity **3** g.p.m. Type: Submersible Turbine Jet Reciprocating Centrifugal **xxx** Other

18. Elevation: _____ 19. Remarks: _____ (Use a second sheet if needed)

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. **Friesen Windmill** 252 Business name License No. Address **Meade, Kansas 67864** Signed **[Signature]** Date **6-15-79** Authorized representative

Topography: Hill Slope Upland Valley

K L 345 10 SE 34 NW