

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 <u>Seward</u>	Fraction <u>NE 1/4 SW 1/4 SW 1/4</u>	Section number <u>21</u>	Township number T <u>31</u> S R	Range number <u>34</u> E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:			
<u>9E - 1 1/2 N</u> <u>Moscow, Kan</u>			<u>Vance Loney</u> <u>R-R.</u> <u>Moscow, Kansas 67952</u>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date <u>11-30-77</u> Well depth <u>180</u> ft.		
				7. <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		
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		
<u>dark sticky when wet</u>		<u>0</u>	<u>4</u>	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface <u>13</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>180</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>250</u>		
<u>silt dark w/ gravel</u>		<u>4</u>	<u>30</u>	10. Screen: Manufacturer's name <u>Pumpco</u> Type <u>saw cut</u> Dia. <u>5"</u> Slot/gauze <u>1/4</u> Length <u>30</u> Set between <u>150</u> ft. and <u>180</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4-1/2</u>		
<u>clay ball + sand</u>		<u>30</u>	<u>40</u>	11. Static water level: _____ mo./day/yr. <u>50</u> ft. below land surface Date <u>11-30-77</u>		
<u>sand coarse w/ some gravel</u>		<u>40</u>	<u>180</u>	12. Pumping level below land surfaces: <u>2</u> ft. after <u>2</u> hrs. pumping <u>20</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ 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 checked="" type="checkbox"/> Pitless adapter <u>13</u> inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.		
				16. Nearest source of possible contamination: _____ ? ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No		
				17. Pump: _____ Not installed Manufacturer's name <u>Reda</u> Model number <u>10D18P</u> HP <u>1</u> Volts <u>230</u> Length of drop pipe <u>80</u> ft. capacity <u>20</u> g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine <input type="checkbox"/> Jet _____ Reciprocating <input type="checkbox"/> Centrifugal _____ Other		
				(Use a second sheet if needed)		
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>Stocum Drilling 127</u> Business name _____ License No. _____ Address <u>Box 237</u> Signed <u>Paul Stocum</u> Date <u>1-17</u> Authorized representative			
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

31 34 W NE 1/4 SW

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

Form WWC-5