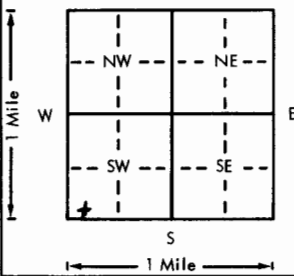


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 SW 1/4 W 1/4 SW 1/4 | Section number 2 | Township number 32 | Range number 10 | X E/W |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: 21 2 N Sharon | | | 3. Owner of well: Bud Johnson R.R. or street: City, state, zip code: Sharon | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile | | Sketch map:  | | 6. Bore hole dia. 8 in. Completion date 12-8-77 Well depth 30 ft. | | |
| 5. Type and color of material | | From To | | 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 | | |
| | | | | 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 | | |
| | | | | 9. Casing: Material <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Dia. 5 in. to 8 ft. depth Height: Above or below surface 20 in. Weight 292 lbs./ft. Wall Thickness: inches or gage No. 258 | | |
| | | | | 10. Screen: Manufacturer's name Peerless Type PVC Dia. 5 Slot/gauze 0.35 Length 5 Set between 8 ft. and 13 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 in | | |
| | | | | 11. Static water level: 8 ft. below land surface Date 5-14-77 mo./day/yr. | | |
| 18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | 19. Remarks: <i>I dont indicate I used a pitless except so it is complete</i> | | 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. | | |
| | | | | 13. Water sample submitted: ____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date ____ | | |
| | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter ____ inches above grade | | |
| | | | | 15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 8 ft. | | |
| | | | | 16. Nearest source of possible contamination: ft. all Direction ____ Type overflow Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| (Use a second sheet if needed) | | | | 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 | | |
| | | | | 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. Lyman Bros 140 Business name License No. Address ____ Signed <i>W.H. Lyman</i> Date 5-16 Authorized representative | | |

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

Form WWC-5

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