

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

<input checked="" type="checkbox"/> 1. Location of well:	County: BARBER	Section: SW 1/4 NW 1/4 E 1/4	Section number: 20	Township number: 38 37 S	Range number: 10 E/W															
2. Distance and direction from nearest town or city: 1/2 mile EAST 700' SL. 600' EA		3. Owner of well: D.N.B. DR 19																		
Street address of well location if in city:		R.R. or street: Box 635																		
City, state, zip code:		Great Bend KS																		
<input checked="" type="checkbox"/> Locate with "X" in section below:		Sketch map:		6. Bore hole dia: 9 in. Completion date: 6-29-78																
		7. <input checked="" 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		<input checked="" type="checkbox"/> Well depth: 55 ft.																
				8. Use: <input 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 checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other																
5. Type and color of material		From To		9. Casing: Material: PVC Height: Above or below																
				Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 287.3 lbs./ft. Dia. 5 in. to 55 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 200.265																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"></td> <td style="width:10%;"></td> <td style="width:10%;"></td> </tr> <tr> <td style="text-align:center;">Clay</td> <td style="text-align:center;">0</td> <td style="text-align:center;">18</td> </tr> <tr> <td style="text-align:center;">Sand Clay</td> <td style="text-align:center;">18</td> <td style="text-align:center;">23</td> </tr> <tr> <td style="text-align:center;">Gravel</td> <td style="text-align:center;">23</td> <td style="text-align:center;">55</td> </tr> <tr> <td style="text-align:center;">Red Bed</td> <td style="text-align:center;">55</td> <td></td> </tr> </table>					Clay	0	18	Sand Clay	18	23	Gravel	23	55	Red Bed	55				10. Screen: Manufacturer's name: Shop made	
Clay	0	18																		
Sand Clay	18	23																		
Gravel	23	55																		
Red Bed	55																			
Type: SAY Dia. 5 Slot/gauze: 1/8 Length 20 Set between 35 ft. and 55 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material: 1/4-1/8																				
				11. Static water level: 18 ft. below land surface Date: 6-29-78																
				12. Pumping level below land surfaces: ___ ft. after ___ hrs. pumping ___ 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 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 20 ft.																
				<input checked="" type="checkbox"/> Nearest source of possible contamination: ft. ___ Direction SW Type Shed Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																
				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																
		(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. <i>Allen Water Well</i> Business name: Allen Water Well License No. 143 Address: 143 City: Great Bend KS Date: 6-29-78 Authorized representative: <i>Clay Kasenick</i>																	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley																				

302
 100
 20
 CSU
 1/4
 1/4
 1/4

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

Form WWC-5