

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		X Fraction W 1/2 NW 1/4		Section number 21	Township number 32	Range number 10
2. Distance and direction from nearest town or city: Sharon Kansas		3. Owner of well: Darius V Woodard		R.R. or street: SHARON KANSAS		
Street address of well location if in city: NW Corner 46th & E D Sharon Kansas 67138		City, state, zip code: Box 25 67138				
X Locate with "X" in section below:		Sketch map: W		6. Bore hole dia. 8 in. Completion date 8-1-78 Well depth 40 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		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		
5. Type and color of material		From		To		
TOP Soil		0		1		
Clay Col Sand fine		1		10		
Course 1 Sand and fine Sand		10		20		
Sand Very Course		20		30		
Red Shale		30		40		
Total Depth of Well 40 feet Red Shale Bottom						
				9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 2 Foot in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 40 ft. depth Wall Thickness: inches or Dia. 5 in. to 4 ft. depth gage No. 4		
				10. Screen: Manufacturer's name Tom & Linnell Type _____ Dia. 5 Slot/gauze 1/16 Length 10 Set between 20 ft. and 30 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4		
				11. Static water level: _____ mo./day/yr. 6 ft. below land surface Date 8-1-78		
				12. Pumping level below land surfaces: _____ ft. after NH 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. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date 8-1		
				14. Well head completion: <input type="checkbox"/> Pitless adapter 2 ft inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 1 ft. to 10 ft.		
				16. Nearest source of possible contamination: City Sewer Line ft. 50 Direction East Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name Star Lite Model number 1P462 HP _____ Volts 230 Length of drop pipe 30 ft. capacity 15 g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input 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. <input checked="" type="checkbox"/> Wesley Well Service 226 Business name _____ License No. _____ Address Mapleville Kansas Signed Tom A. Webb Date 8-1-78 Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)				

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

Form WWC-5