

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 NE 1/4 NE 1/4 SE 1/4	Section number 6	Township number T 32	Range number S R 11 W	E/W
X Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well: Robert Dadson R.R. or street: City, state, zip code: Medicine Lodge, Ks			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 10 in. Completion date Well depth 50 ft. 16 MAY 78			
				7. 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			
Soil		0	2	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface 12 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 30 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 1258			
Sand, fine and silt		2	4	10. Screen: Manufacturer's name _____ Type Saw slot Dia. 5 Slot/gauze 48 Length 20' Set between 30 ft. and 50 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 X 1/2			
Sand, fine		4	16	11. Static water level: _____ mo./day/yr. 26 ft. below land surface Date 16 MAY 78			
Clay, red		16	27	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 40 _____ g.p.m.			
Sand, fine to coarse and fine gravel		27	38	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____			
Clay, tan		38	41	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 12 inches above grade			
Sand, fine to coarse and fine gravel		41	50	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From 4 ft. to 14 ft.			
Shale, red		50	65	16. Nearest source of possible contamination: ft. 180 Direction SE Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____			
				17. Pump: _____ Not installed Manufacturer's name STA RITE Model number 30 HP 3/4 Volts 230 Length of drop pipe 40 ft. capacity 15 g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine _____ <input type="checkbox"/> Jet _____ Reciprocating _____ <input type="checkbox"/> Centrifugal _____ 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. Central Well & Pump Svc. 325 Business name _____ License No. _____ Address 121 S. Taylor Pratt, Ks. Signed Robert Dadson Date 19 May 78 Authorized representative			
18. Elevation:		19. Remarks:		(Use a second sheet if needed)			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		4'X4'X4" slab poured below pitless adapter		Sec 3-2-1-1 NE NE SE 1/4 1/4 1/4			

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

Form WWC-5