

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 Comanche	Fraction CSE 1/4 1/4 1/4	Section number 3	Township number T 32 S	Range number R 18 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:					
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: Well No. 2 (TH 2-76)		6. Bore hole dia. <u>30</u> in. Completion date <u>6/8/76</u> Well depth <u>241</u> ft.			
5. Type and color of material			From	To	7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary			
			Top soil		0	2	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	
			Clay		2	5	9. Casing: Material <u>Stl.</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>36</u> lbs./ft. Dia. <u>16</u> in. to <u>150</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth Gauge No. <u>20</u> "	
			Med to coarse sand & gravel		5	68	10. Screen: Manufacturer's name <u>Doerr</u> <u>Metal Products</u> Type <u>Stl.</u> Dia. <u>16</u> " Slot/gauze <u>125</u> Length <u>92</u> ' Set between <u>149</u> ' ft. and <u>241</u> ' ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-3/8</u> "	
			Clay		68	75	11. Static water level: <u>7-12-76</u> mo./day/yr. <u>84</u> ft. below land surface Date <u> </u>	
			Med. to coarse sand & gravel		75	91	12. Pumping level below land surfaces: <u>130</u> ft. after <u>24</u> hrs. pumping <u>800</u> g.p.m. <u>890</u> g.p.m. Estimated maximum yield <u>890</u> g.p.m.	
			Clay		91	116	13. Water sample submitted: <u> </u> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u> </u>	
			Med. to coarse sand & gravel		116	143	14. Well head completion: <input type="checkbox"/> Pitless adapter <u> </u> Inches above grade	
			Clay		143	147	15. Well grouted? <u>Yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
			Med. to coarse sand & gravel		147	241	16. Nearest source of possible contamination: ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Red shale		241	245	17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Layne</u> Model number <u>12 KM</u> HP <u>75</u> Volts <u>460</u> Length of drop pipe <u>140</u> ft. capacity <u>800</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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. Layne Western Co. 102 Business name License No. Address <u>Wichita, Kansas</u> Signed <u>[Signature]</u> Date <u>7-29-76</u>				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley								

T 32 S
 R 18 E
 Sec 3-CSE
 1/4 1/4 1/4

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

Form WWC-5