

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 <b>COMANCHE</b>	Fraction <b>NW 1/4 NW 1/4 NW 1/4</b>	Section number <b>8</b>	Township number <b>T 32 S</b>	Range number <b>R 18 W E/W</b>
2. Distance and direction from nearest town or city: <b>1 1/2 MI E of Coldwater, Ks</b>				3. Owner of well: <b>GARVON ELEVATORS</b> R.R. or street: City, state, zip code: <b>HUTCHINSON, Ks</b>		
4. Locate with "X" in section below: Sketch map:  N W E S 1 Mile				6. Bore hole dia. <b>10</b> in. Completion date <b>9 July 78</b> Well depth <b>118</b> ft.		
5. Type and color of material				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 _____ Height <b>Above</b> or below Threaded _____ Welded _____ Surface <b>12</b> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>88</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>258</b>		
				10. Screen: Manufacturer's name <b>Pitless</b> Type <b>Saw slot</b> Dia. <b>5"</b> Slot/gauze <b>1/8</b> Length <b>30'</b> Set between <b>88'</b> ft. and <b>118</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8 X 1/4</b>		
				11. Static water level: _____ mo./day/yr. <b>72</b> ft. below land surface Date <b>9 July 78</b>		
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>40</b> 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 checked="" type="checkbox"/> Pitless adapter <b>12</b> 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 <b>4</b> ft. to <b>14</b> ft.		
				16. Nearest source of possible contamination: ft. <b>None</b> Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name <b>STARITE</b> Model number <b>8</b> HP <b>1/2</b> Volts <b>230</b> Length of drop pipe <b>100</b> ft. capacity <b>10</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine <input type="checkbox"/> Jet _____ Reciprocating <input type="checkbox"/> Centrifugal _____ Other		
(Use a second sheet if needed)						
18. Elevation:		19. Remarks: <b>4'x4'x4" Concrete slab below pitless adapter</b>		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. <b>Central Well &amp; Pump 325</b> Business name _____ License No. _____ Address <b>121 S. Taylor Pratt Ks</b> Signed <b>Bob Anonewell</b> Date <b>20 July 78</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 32 S  
 R 18 W  
 Sec 8  
 NW 1/4 NW 1/4 NW 1/4

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

Form WWC-5