

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>Meade</b>	Fraction <b>NE 1/4 NE 1/4 NW 1/4</b>	Section number <b>25</b>	Township number <b>T 32 S R 27 E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>9 miles southeast of Meade, Kansas</b>			3. Owner of well: <b>Henry F. Loewen RFD</b>			
Street address of well location if in city:			R.R. or street: <b>Meade, Kansas 67864</b>			
City, state, zip code:						
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>9 7/8</b> in. Completion date _____		
		<p>Well depth <b>184</b> ft. <b>10-07-77</b></p>		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 type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock		
				9. Casing: Material <b>PVC</b> Height: Above or below _____		
				Threaded _____ Welded <input checked="" type="checkbox"/> Surface <b>12</b> in.		
				RMP _____ PVC <input checked="" type="checkbox"/> Weight <b>2.8</b> lbs./ft.		
				Dia. <b>5</b> in. to <b>184</b> ft. depth Wall Thickness: inches or _____		
				Dia. _____ in. to _____ ft. depth gage No. <b>265</b>		
				10. Screen: Manufacturer's name _____		
				<b>Jess &amp; Lowell</b>		
				Type <b>PVC</b> Dia. <b>5"</b>		
				Slot/gauge <b>1/8"</b> Length <b>50'</b>		
				Set between <b>134</b> ft. and <b>184</b> ft.		
				Gravel pack? <b>Yes</b> Size range of material <b>1/64-5/32</b>		
				11. Static water level: _____ mo./day/yr.		
				<b>136</b> ft. below land surface Date <b>9/2/77</b>		
				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.		
				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
				14. Well head completion:		
				_____ Pitless adapter <b>24</b> Inches above grade		
				15. Well grouted? <b>Yes</b>		
				With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____		
				Depth: From <b>0</b> ft. to <b>10</b> ft.		
				16. Nearest source of possible contamination:		
				ft. <b>200</b> Direction <b>SW</b> Type <b>well</b>		
				Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____		
				17. Pump: _____ Not installed		
				Manufacturer's name <b>Customers Pump</b>		
				Model number <b>S100M</b> HP <b>1</b> Volts <b>220</b>		
				Length of drop pipe <b>171</b> ft. capacity <b>12</b> g.p.m.		
				Type:		
				<input checked="" type="checkbox"/> Submersible _____ Turbine _____		
				_____ Jet _____ Reciprocating _____		
				_____ Centrifugal _____ Other _____		
				(Use a second sheet if needed)		
18. Elevation:		19. Remarks:				
Topography:		<b># 16 Old well was plugged</b>				
<input type="checkbox"/> Hill						
<input type="checkbox"/> Slope						
<input checked="" type="checkbox"/> Upland						
<input type="checkbox"/> Valley						
		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>Friesen Windmill</b> <b>252</b>				
		Business name _____ License No. _____				
		Address <b>Meade, Kansas 67864</b>				
		Signed <i>[Signature]</i> Date <b>10-21-77</b>				
		Authorized representative _____				

32 270 25  
 T R Sec  
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5