

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 SE 1/4</b>	Section number <b>36</b>	Township number <b>T 32</b>	Range number <b>S R 28 E/W</b>
2. Distance and direction from nearest town or city: <b>5 miles South of Meade, 3 east &amp; 1 north.</b> Street address of well location if in city:			3. Owner of well: <b>Dick Unruh</b> R.R. or street: <b>RFD</b> City, state, zip code: <b>Meade, Kansas 67864</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <del>XXXX</del> <b>125</b> ft. Completion date <b>12-15-77</b> Well depth	
		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 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 <b>TIN</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>125</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <input type="checkbox"/>	
5. Type and color of material			From	To	
METHOD OF PLUGGING					
<i>filled with sand &amp; cemented</i>					
				10. Screen: Manufacturer's name <input type="checkbox"/>	
				Type <input type="checkbox"/> Dia. <input type="checkbox"/>	
				Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/>	
				Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft.	
				Gravel pack? <input type="checkbox"/> Size range of material <input type="checkbox"/>	
				11. Static water level: <input type="checkbox"/> mo./day/yr. <b>125</b> ft. below land surface Date <input type="checkbox"/>	
				12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.	
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/>	
				14. Well head completion: <b>3' cement plug</b> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	
				15. Well grouted? <input type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <input type="checkbox"/> ft. to <input type="checkbox"/> ft.	
				16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible <input 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: <b>Plugged old well according to state specifications.</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>Eriesen Windmill</b> <b>252</b> Business name License No. Address <b>Meade, Kansas</b> <b>67864</b> Signed <i>[Signature]</i> Date <b>2-4-78</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 32 R 28 E  
 Sec 36 NE 1/4 SE 1/4

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

Form WWC-5