

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 SE 1/4 SW 1/4 NW 1/4	Section number 3	Township number T 33 S R 20 EW	Range number 20 EW
2. Distance and direction from nearest town or city: Street address of well location if in city: lot 14, Block 170			3. Owner of well: Kern Bayne R.R. or street: corner Broadway & main City, state, zip code: Protection, Kans. 67127			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 in. Completion date 8-24-76 Well depth 45 ft.		
				7. <input checked="" 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		
5. Type and color of material		From	To	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 type="checkbox"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
clay, dark		0	4	9. Casing: Material RMP Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 15 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 15 ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. 1200		
clay, tan		4	34	10. Screen: Manufacturer's name Jess & Lowell Type RMP Dia. 5" Slot/gauze saw Length 10 Set between 35 ft. and 45 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4-3/4		
fine sand mixed with black clay		34	45	11. Static water level: _____ mo./day/yr. 22 1/2 ft. below land surface Date 8-24-76		
				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 type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ Inches above grade		
				15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 14 ft. to 4 ft.		
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name fasuggi Model number _____ HP 1/2 Volts 120 Length of drop pipe 40 ft. capacity 7 g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input checked="" type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
				(Use a second sheet if needed)		
18. Elevation level Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: customer installed pump			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. Wymer Blacksmith, Shop 228 Business name _____ License No. _____ Address Protection, Ka, 67127 Signed Kenneth Wymer Date 8-24-76 Authorized representative		

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

Form WWC-5