

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

SITKA

DBR

1. Location of well:	County <b>Clark</b>	Fraction <b>NW 1/4 SE 1/4 SW 1/4 SE 1/4</b>	Section number <b>30</b>	Township number <b>T 33 S</b>	Range number <b>R 22 E/W</b>
2. Distance and direction from nearest town or city: <b>2 miles Southeast of Ashland, Kans.</b>			3. Owner of well: <b>Bill Anderson</b> R.R. or street: <b>Box 58</b> City, state, zip code: <b>Ashland, Kansas 67831</b>		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 			
5. Type and color of material		From	To	6. Bore hole dia. <b>12</b> in. Completion date <b>4-16-77</b> Well depth <b>90</b> ft.	
Surface		0	3	7. <input checked="" 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	
Gray and green clay		3	12	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	
Red clay		12	40	9. Casing: Material <b>plst</b> Height: <b>above</b> or below Threaded <input type="checkbox"/> Welded <b>gl</b> Surface <b>18</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>2.3</b> lbs./ft. Dia. <b>6</b> in. to <b>90</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>0, 250</b>	
Good A-1 sand and gravel		40	46	10. Screen: Manufacturer's name <b>Jess and Lowell</b> Type <b>RMP</b> Dia. <b>6 in</b> Slot/gauze <b>.06</b> Length <b>50 ft.</b> Set between <b>40</b> ft. and <b>90</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> yes Size range of material <b>1/8</b>	
Red bed		<b>46</b>	65	11. Static water level: <b>12</b> ft. below land surface Date <b>4-16-77</b> mo./day/yr.	
Liver mud		65	70	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.	
Red bed		70	75	13. Water sample submitted: ____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date ____	
Liver mud and red bed 50% each		75	84	14. Well head completion: <b>none</b> <input type="checkbox"/> Pitless adapter ____ inches above grade	
Sand rock and liver mud		84	90	15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>18</b> ft.	
<b>BRock 46'</b>				16. Nearest source of possible contamination: <b>none</b> ft. ____ Direction ____ Type ____ Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<b>12</b> <b>34' sat thick</b>				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ 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	
<b>in Alluvium</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>Hodde Drilling Co 302</b> Business name License No. ____ Address <b>Rt 1 Dodge City, Kans</b> Signed <b>Walter Hodde Jr.</b> Date <b>4-20-77</b> Authorized representative	
18. Elevation:		19. Remarks: <b>Concrete slab to be installed by the landowner at surface of ground. He knows this is a regulation.</b> <b>Bill Anderson</b> 1863 40 1817			
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)			

3322030 NW 1/4 SE

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

Form WWC-5