

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 Clark | Fraction NW 1/4 SE 1/4 NW 1/4 | Section number 9 | Township number T 33 S R 23 | Range number 23 |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: 3 miles west & 1/2 miles South of Ashland | | | | 3. Owner of well: Raymond Broadie R.R. or street: City, state, zip code: Ashland, KS | | |
| 4. Locate with "X" in section below: | | Sketch map: | | 6. Bore hole dia. <u>9</u> in. Completion date _____ Well depth <u>169</u> ft. <u>10-24-77</u> | | |
| | | | | 7. <input checked="" type="checkbox"/> Cable tool 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 | | | | 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 <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other | | |
| | | | | 9. Casing: Material _____ Height: Above _____ ft. Threaded _____ Welded _____ Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>159</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>0.265"</u> | | |
| Soil | | | | From | To | 10. Screen: Manufacturer's name _____ Jet Stream |
| Red clay and silt, some streaks of white clay | | | | 0 | 4 | Type <u>PVC</u> Dia. <u>5 in</u> Slot/gauze <u>'fine'</u> Length <u>10 ft</u> Set between <u>160</u> ft. and <u>160</u> ft. |
| Red clay and silt, much softer | | | | 4 | 48 | Set between _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> yes Size range of material <u>1/4" down</u> |
| Slip clay red clay | | | | 48 | 50 | 11. Static water level: _____ mo./day/yr. <u>58</u> ft. below land surface Date <u>10-24-77</u> |
| red clay and silt, with softer streaks | | | | 50 | 65 | 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>10</u> g.p.m. |
| | | | | | | 13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____ |
| | | | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade |
| Block 4 | | | | | | 15. Well grouted? <input checked="" type="checkbox"/> yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft. |
| | | | | | | 16. Nearest source of possible contamination: see notes ft. _____ Direction _____ Type <u>Item 19</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Pre-O₂ well | | | | | | 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 |
| (Use a second sheet if needed) | | | | | | 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. ABC Drilling, Inc 246 Business name _____ License No. _____ Address <u>Scott City, KS 67871</u> Signed <u>Scott City</u> Date <u>10/24/77</u> Authorized representative |
| 18. Elevation: | 19. Remarks: | | 20. Water well contractor's certification: | | | |
| Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | This well is on the high point of rolling pasture land. Rainwater and cattle would be the only possible sources of contamination. TOPIC | | This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. ABC Drilling, Inc 246 Business name _____ License No. _____ Address <u>Scott City, KS 67871</u> Signed <u>Scott City</u> Date <u>10/24/77</u> Authorized representative | | | |

33 23 9
 T 33 S R 23
 Sec 9 NW SE Allu
 1/4 1/4 1/4

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

Form WWC-5

4
2058