

USE TYPEWRITER-OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

Golliner 1-22

Invoice No. 11131

1 Location of well:	County Meade	Township name	Fraction C-SE-NE	Section number 22	Town number 329 33S	Range number 29W
Distance and direction from nearest town or city: 8 miles south east of Plains Street address of well location if in city:				3 Owner of well: Sage Drilling Company Rig #2 Address: 500 Bitting Bldg. Wichita, Kansas 67202		
Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		4 Well depth: 280 ft. Date of completion 3-12-75 Well diameter 9 in.		
2 Type and color of material		From To		5 <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		
				6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> Oil Well		
				7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. 2.50 in. Weight 2.78 lbs./ft. 2 in. to 250 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 5 in. to 280 ft. depth		
				8 Screen: Manufacturer WESCO Type PVC Dia. 5 Slot/gauze .030 Length 10 Set between 250 ft. and 260 ft. Fittings: 1/8 to 3/16 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material		
				9 Static water level: 160 ft. below land surface Date 3-12-75		
16 Remarks: elevation . Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley				10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 60 g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date		
				12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> 12 inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 10 ft.		
				14 Nearest source of possible contamination: ft. 100 Direction Northwest Type oil well Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(use a second sheet if needed)				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Model number HP Volts Length of drop pipe ft. capacity g.m.p. 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		
				17 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. Carlile Water Well 118 Business name Box 275, Liberal, Kansas License No. Address Edward E. Meador Date 3-20-75 Signed Edward E. Meador Authorized representative		

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5