

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>NW 1/4 SE 1/4 NW 1/4</b>	Section number <b>27</b>	Township number <b>T 33 S R 29 E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>Meade</b> Street address of well location if in city:				3. Owner of well: <b>Holmes Carol Bender</b> R.R. or street: City, state, zip code: <b>Plains, Kansas</b>		
4. Locate with "X" in section below: <div style="display: flex; align-items: center;"><div style="text-align: center;"><p>1 Mile</p><p>W</p><p>1 Mile</p><p>S</p></div><div style="text-align: center;"><p>N</p><p>NE</p><p>SE</p><p>SW</p></div><div style="text-align: center;"><p>E</p></div></div> <p>Near center of the NW 1/4, Sec. 27 T33S, R29W, Meade County, Kansas.</p>				6. Bore hole dia. <b>28</b> in. Completion date <b>2 Feb</b> Well depth <b>370</b> ft.		
5. Type and color of material				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 checked="" type="checkbox"/> Reverse rotary		
				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		
				9. Casing: Material <b>Stl</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>37</b> lbs./ft. Dia. <b>16</b> in. to <b>210</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>.219</b>		
				10. Screen: Manufacturer's name <b>Doerr,</b> <b>Foster</b> <b>Louver &amp; Millslot</b> Type <input type="checkbox"/> Dia. <b>16</b> in. Slot/gauze <b>1/8"</b> Length <b>160</b> Set between <b>210</b> ft. and <b>370</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>3.4mm</b>		
				11. Static water level: <input type="checkbox"/> mo./day/yr. <b>48</b> ft. below land surface Date <b>7-25-75</b>		
				12. Pumping level below land surfaces: <b>80</b> ft. after <b>1</b> hrs. pumping <b>1016</b> g.p.m. <b>168</b> ft. after <b>1</b> hrs. pumping <b>2670</b> g.p.m. Estimated maximum yield <b>3000</b> g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade		
				15. Well grouted? <input type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
				16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(Use a second sheet if needed)				17. Pump: Not installed Manufacturer's name <b>Layne &amp; Bowler</b> Model number <b>12KL</b> HP <b>125</b> Volts <input type="checkbox"/> Length of drop pipe <b>220</b> ft. capacity <b>800</b> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
				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>Layne-Western Co., Inc.</b> 150 Business name License No. Address <b>Garden City, Kansas</b> Signed <b>[Signature]</b> Date <b>24 May 76</b> Authorized representative		
				18. Elevation:		
				19. Remarks:		
				Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		

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

Form WWC-5