

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>Seward</b>	Fraction <b>SW1/4 SW1/4 NE1/4</b>	Section number <b>19</b>	Township number <b>T 33 S R 31 E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>16 mi NE of Liberal, KS.</b>			3. Owner of well: <b>Charles Brisendine</b>		
Street address of well location if in city:			R.R. or street: <b>724 N Clay</b>		
			City, state, zip code: <b>Liberal, Kansas</b>		
4. Locate with "X" in section below: N		Sketch map:		6. Bore hole dia. <b>9</b> in. Completion date <b>6/15/76</b> Well depth <b>300</b> ft.	
				7. <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	
				8. Use: <input checked="" 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 type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
5. Type and color of material		From	To	9. Casing: Material <b>P1+S</b> Height: <b>Above or below</b> Threaded <input type="checkbox"/> Welded <b>91</b> Surface <b>14</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>240</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>0258</b>	
<b>Overburden</b>		<b>0</b>	<b>203</b>	10. Screen: Manufacturer's name <b>J+L</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>1/16</b> Length <b>60</b> Set between <b>240</b> ft. and <b>300</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>Yes</b> Size range of material <b>1/8"</b>	
<b>Clay</b>		<b>203</b>	<b>235</b>	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>203</b> ft. below land surface Date <b>6/15/76</b>	
<b>Fine Sand + Clay</b>		<b>235</b>	<b>250</b>	12. Pumping level below land surfaces: <b>204</b> ft. after <b>1</b> hrs. pumping <b>30</b> g.p.m. <b>204</b> ft. after <b>10</b> hrs. pumping <b>30</b> g.p.m. Estimated maximum yield <b>60</b> g.p.m.	
<b>Coarse Sand + Gravel</b>		<b>250</b>	<b>300</b>	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 checked="" type="checkbox"/> Pitless adapter <b>15</b> Inches above grade	
				15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>3</b> ft. to <b>15</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	
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Berkeley</b> Model number <b>4C.L. 17</b> HP <b>3</b> Volts <b>220</b> Length of drop pipe <b>252</b> ft. capacity <b>30</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
18. Elevation:		(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. <b>T+W Water Well</b> <b>142</b> Business name License No. Address <b>Box 816 Liberal, KS</b> Signed <b>CA Wagoner</b> Date <b>10/15/76</b> Authorized representative	
19. Remarks: <b>#16 New Building Site</b>					
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 33 S R 31 E/W  
 Sec 19  
 1/4 1/4 1/4 1/4  
 SUSWANE

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

Form WWC-5