

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>Morton</b>	Fraction <b>NE 1/4 NE 1/4 SW 1/4</b>	Section number <b>12</b>	Township number T <b>33</b>	Range number S R <b>43</b>				
2. Distance and direction from nearest town or city: Street address of well location if in city:	<b>12 N 2 1/2 W of Elkhart</b>			3. Owner of well: <b>U.S. Forest Service</b>					
4. Locate with "X" in section below:				Sketch map:					
<div style="display: flex; align-items: center;"> <div style="width: 50px; text-align: center;">1 Mile</div> </div>									
5. Type and color of material				From	To	6. Bore hole dia. <b>9</b> in. Completion date _____ Well depth <b>120</b> ft. <b>6/19/78</b>			
<b>Overburden</b>				<b>0</b>	<b>65</b>	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			
<b>Clay</b>				<b>65</b>	<b>85</b>	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			
<b>Fine sand + clay</b>				<b>85</b>	<b>100</b>	9. Casing: Material <b>PiTS</b> Height: Above or below Threaded <input type="checkbox"/> Welded <b>gl</b> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>80</b> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <b>0-258</b>			
<b>Medium to Coarse sand</b>				<b>100</b>	<b>120</b>	10. Screen: Manufacturer's name <b>Pearless Plastics</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>4/16</b> Length <b>40</b> Set between <b>80</b> ft. and <b>120</b> ft. ____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <b>1/8</b>			
						11. Static water level: _____ mo./day/yr. <b>65</b> ft. below land surface Date <b>6/19/78</b>			
						12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>50</b> g.p.m.			
						13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
						14. Well head completion: <input type="checkbox"/> Pitless adapter <b>18</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>13</b> ft.			
						16. Nearest source of possible contamination: <b>None</b> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
						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)									
18. Elevation:	19. Remarks: <b>Pasteur Well</b>			20. Water well contractor's certification:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	<b>Pasteur #10</b> <b>#17 Well to be completed at a later date.</b>			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 Service 142</b> Business name _____ License No. _____ Address <b>Box 816 Liberal, KS</b> Signed <b>[Signature]</b> Date <b>6/19/78</b> <b>[Signature]</b> Authorized representative					

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