WATER WELL RECORD
KSA 82a-1201-1215

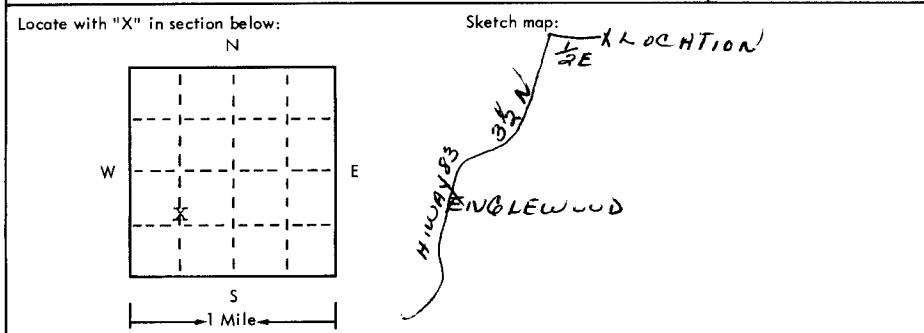|										
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Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:

County	Township name	Fraction	Section number	Town number	Range number
Clark		C SW¼	7	34S	24W

Distance and direction from nearest town or city: 3½ miles north of Englewood and ½ Mi. east

Street address of well location if in city:

3 Owner of well: Sage Drilling Company
Address: 500 Bitting Bldg. Wichita, Kansas 67202

Locate with "X" in section below:

Sketch map: X LOCATION
½E
34N
HIGHWAY 83
ENGLEWOOD
1 Mile

4 Well depth: 120 ft. Date of completion 8-14-75
Well diameter 9 in.

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug
☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☐ Domestic ☐ Public supply ☒ Industry
☐ Irrigation ☐ Air conditioning ☐ Commercial
☐ Test well ☐ oil rig

7 Casing: Material PVC Height: above/below
Threaded ☐ Welded ☐ Surface 28 in.
Diam. Weight 2.78 lbs./ft.
2 in. to 80 ft. depth Drive shoe? ☐ Yes ☒ No
5g in. to 120 ft. depth

2

Type and color of material	From	To
Surface	0	2
Fine sand	2	24
Sandy clay	24	68
Coarse sand	68	110
Coarse sand (hard drilling) Red Bed	110	120
BROCK 110		
17 93'sat thick		
in Alluvium (use a second sheet if needed)		

8 Screen:
Manufacturer sawed perf.
Type PVC Dia. 5
Slot/gauze .030 Length 30
Set between 80 ft. and 110 ft.
Fittings: 1/8- 3/16
Gravel pack ☒ Yes ☐ No Size range of material

9 Static water level:
17 ft. below land surface Date 8-14-75

10 Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 70 g.p.m.

11 Water sample submitted:
☐ Yes ☒ No Date ___

12 Well head completion:
☐ Pitless adapter 28 Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 100 Direction NE Type oil well
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Certrifugal ☐ Other

16 Remarks: elevation

Topography:
☐ Hill
☐ Slope
☒ Upland
☐ Valley

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   License No.
Address Box 275, Liberal, Ks.
Signed _____ Date 8-22-75
Authorized representative

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

Form WWC-5

677-H

34 24W 7 CSW