

PERMIT #T79-41

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

CWW Inv. #15612

Adams #4-33

Final flats

1. Location of well:	County Meade	Fraction 1/4 1/4 C-SW/4	Section number 33	Township number T 34S S R	Range number 29W E/W
2. Distance and direction from nearest town or city: From Meade Lake go South to Port of Entry then 1 1/2 mi South - 1/2 mi East & North to location			3. Owner of well: Sage Drilling Company R.R. or street: 222 Sutton Place City, state, zip code: Wichita, Kansas 67202		
4. Locate with "X" in section below:		Sketch map:			
		<p>6. Bore hole dia. <u>9</u> in. Completion date <u>3-8-79</u> Well depth <u>300</u> ft.</p> <p>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</p> <p>8. 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"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other</p> <p>9. Casing: Material <input type="checkbox"/> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>28</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>2.78</u> lbs./ft. Dia. <u>5</u> in. to <u>240</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>240</u> ft. depth gage No. <u>265</u></p>			
5. Type and color of material		From	To		
Surface		0	2	10. Screen: Manufacturer's name <u>Sawed perf.</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>.030</u> Length <u>60'</u> Set between <u>240</u> ft. and <u>300</u> ft. Set between <u>240</u> ft. and <u>300</u> ft. Gravel pack? <u>yes</u> Size range of material <u>1/8-3/16</u>	
Clay		2	55	11. Static water level: <u>70</u> ft. below land surface Date <u>3/8/79</u>	
Blue clay		55	95	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>60</u> g.p.m.	
Fine sand 60% & sandy clay 40%		95	135	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
Clay		135	245	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>28</u> inches above grade	
Medium to large sand		245	300	15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: ft. <u>100</u> Direction <u>NE</u> Type <u>oilwell</u> 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	
				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. Carlile Water Well Service 118 Business name _____ License No. _____ Address <u>Box AA, Liberal, KS</u> Signed <u>Edward E. Means</u> Date <u>3-21-79</u> Authorized representative	
18. Elevation:		19. Remarks:			
<p>Topography:</p> <p><input type="checkbox"/> Hill</p> <p><input type="checkbox"/> Slope</p> <p><input checked="" type="checkbox"/> Upland</p> <p><input type="checkbox"/> Valley</p>		<p><i>Too much relief on L&D</i></p>			

34
 29
 33
 1/4 1/4 1/4
 CSW

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

Form WWC-5