

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 <u>Seward</u> Section <u>SE 1/4 SW 1/4 NE 1/4</u> Section number <u>9</u> Township number <u>T 34 S R 32 E/W</u>	
2. Distance and direction from nearest town or city: <u>Hane</u> 3. Owner of well: <u>Wibbur W. Keehn</u> Street address of well location if in city: _____ R.R. or street: <u>RT 2, Box 94A</u> City, state, zip code: <u>Liberal, Kansas</u>	
4. Locate with "X" in section below: Sketch map:	
5. Type and color of material	
	From To
<u>Top Soil</u>	<u>0 1</u>
<u>Clay</u>	<u>1 6</u>
<u>Fine Sand &amp; Silt</u>	<u>6 20</u>
<u>Clay</u>	<u>20 31</u>
<u>Med to Coarse Sand</u>	<u>31 68</u>
<u>Light Clay</u>	<u>68 102</u>
<u>Coarse Sand &amp; Clay</u>	<u>102 185</u>
<u>Clay</u>	<u>185 203</u>
<u>Clay &amp; Med Sand</u>	<u>203 234</u>
<u>Coarse Sand - Fast drilling</u>	<u>234 298</u>
<u>Clay &amp; Sand Stra</u>	<u>298 276</u>
(Use a second sheet if needed)	
18. Elevation: _____ Topography: _____ Hill _____ Slope <input checked="" type="checkbox"/> Upland _____ Valley	19. Remarks: _____
6. Bore hole dia. <u>5 3/4</u> in. Completion date <u>May 10 1978</u> Well depth <u>276</u> ft.	
7. <input checked="" 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	
9. Casing: Material <u>PVC</u> Height: Above or below Threaded _____ Welded _____ Surface <u>2'</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5"</u> in. to <u>276</u> ft. depth Wall Thickness: inches _____ Dia. _____ in. to _____ ft. depth gage No. <u>258</u>	
10. Screens: Manufacturer's name <u>Hand slotted</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>3" x 8"</u> Length <u>60'</u> Set between <u>216</u> ft. and <u>276</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4" - 1/2"</u>	
11. Static water level: _____ mo./day/yr. <u>138</u> ft. below land surface Date <u>5/10/78</u>	
12. Pumping level below land surfaces: <u>N/A</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>70</u> g.p.m.	
13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____	
14. Well head completion: _____ Pitless adapter <u>24</u> Inches above grade	
15. Well grouted? <u>Yes</u> With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
16. Nearest source of possible contamination: _____ ft. <u>50</u> Direction <u>West</u> Type <u>SEWER</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ 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: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ 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. <u>Combs Eng. 342</u> Business name _____ License No. _____ Address <u>Turpin, Okla</u> Signed <u>Neal Combs</u> Date <u>5/10/78</u> Authorized representative	

37  
R 320  
9  
SESUWE  
1/4 1/4 1/4

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

Form WWC-5