

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 Seward	Fraction SW 1/4 SW 1/4 SW 1/4	Section number 9	Township number T 34 S	Range number R 33 E/W
2. Distance and direction from nearest town or city: Street address of well location if in city: 3 mi N. of Liberal on 83 Hwy 2 mi E.			3. Owner of well: Mike Fitzgerald R.R. or street: RT #2 City, state, zip code: Liberal Kansas			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. 9 in. Completion date July 20 Well depth 265 ft. 1980	
					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	
5. Type and color of material		From	To	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		
Top Soil		0	4	9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 265 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 1258		
Fine Sand + Silt		4	10	10. Screen: Manufacturer's name Pumpco Type PVC Dia. 5" Slot Slot Length 60 Set between 205 ft. and 265 ft. ft. and <input type="checkbox"/> ft. Gravel pack? Yes Size range of material 1/8-1/4		
Fine Sand		10	54	11. Static water level: <input type="checkbox"/> mo./day/yr. 160 ft. below land surface Date July 20-80		
Clay		54	82	12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping N/A g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 80 g.p.m.		
Sand		82	95	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/>		
Clay & Sand str		95	158	14. Well head completion: <input type="checkbox"/> Pitless adapter 20 Inches above grade		
Coarse Sand & Gravel		158	265	15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 15 ft.		
				16. Nearest source of possible contamination: ft. 50 Direction W Type SEWER Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		Septic tank not constructed at the time of well drilling		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Combs Eng 342 Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address 39 Turpin Okla Signed Neal Combs Date July 20 1980 Authorized representative		

T 34 R 33 W E 2 S 34 S W SW

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

Form WWC-5