

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

Nix #1

1. Location of well:		County <b>Seward</b>	Fraction <b>1/4 SE 1/4 NE 1/4</b>	Section number <b>4</b>	Township number <b>T 34 S R 34</b>	Range number <b>34</b>	E/W
2. Distance and direction from nearest town or city: <b>4 north of Liberal 5 west and 3/4 North.</b>				3. Owner of well: <b>Sage Drilling Company</b> R.R. or street: <b>500 Biting Bldg.</b> City, state, zip code: <b>Wichita, Kansas 67202</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>9</u> in. Completion date <u>1-31-76</u> Well depth <u>260</u> ft.			
				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			
5. Type and color of material				From	To	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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other	
Surface				0	2	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface <u>28</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>2.78</u> lbs./ft. Dia. <u>5</u> in. to <u>174</u> ft. depth   Wall Thickness: inches or Dia. <u>5</u> in. to <u>260</u> ft. depth   gage No. <u>265</u>	
Fine sand				2	123	10. Screen: Manufacturer's name _____ <u>sawed perf.</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>.030</u> Length <u>80</u> Set between <u>174</u> ft. and <u>254</u> ft. _____ ft. and _____ ft.	
Clay and medium to large sand 10-90				123	146	Gravel pack? <input checked="" type="checkbox"/> <u>yes</u> Size range of material <u>1/8 to 3/16</u>	
Clay and medium to large sand 40-60				146	175	11. Static water level: _____ mo./day/yr. <u>130</u> ft. below land surface Date <u>1-31-76</u>	
Fine sand				175	220	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.	
Clay, fine & medium to large sand 20-80				220	260	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
						14. Well head completion: <input type="checkbox"/> Pitless adapter _____ <u>28</u> inches above grade	
						15. Well grouted? <input checked="" type="checkbox"/> <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. <b>Carlile Water Well 118</b> Business name _____ License No. _____ Address <u>Box 275, Liberal, Kans.</u> Signed <u>Edward E. Means</u> Date <u>2-6-76</u> Authorized representative	
18. Elevation:		19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley							

34  
 34  
 4  
 SE NE  
 1/4 1/4

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

Form WWC-5