

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 <b>SMITH</b>	Fraction <b>NE 1/4 NE 1/4 NW 1/4</b>	Section number <b>30</b>	Township number T <b>5</b> S R <b>13</b> E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:	<b>3 S. 1/2 E OF JAYLORD HAN.</b>		3. Owner of well: <b>ROBERT PENNINGTON</b> R.R. or street: <b>RR 2</b> City, state, zip code: <b>SMITH CENTER K. 66967</b>		
4. Locate with "X" in section below: N W E S 1 Mile	Sketch map: <b>WELL X 500 FT. RIVER</b>		6. Bore hole dia. <b>3 1/2</b> in. Completion date <b>10-7-79</b> Well depth <b>75</b> ft.		
5. Type and color of material			7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		
From To			9. Casing: Material <b>PA</b> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <b>1 1/2</b> in. to <b>62</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>1"</b>		
			10. Screen: Manufacturer's name <b>JOHNSONS</b> Type <b>C. Galv.</b> Dia. <b>1 1/2"</b> Slot/gauze <b>1/8"</b> Length <b>13'</b> Set between <b>62</b> ft. and <b>75</b> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material. <b>1/4"</b>		
Topsoil Clay Sand yellow			11. Static water level: _____ mo./day/yr. <b>32</b> ft. below land surface Date <b>9-10-79</b>		
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>200</b> g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade		
			15. Well grouted? <b>YES</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>2</b> ft. to <b>13</b> ft.		
			16. Nearest source of possible contamination: ft. <b>500</b> Direction <b>E</b> Type <b>RIVER</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(Use a second sheet if needed)			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>D &amp; D Service</b> <b>108</b> Business name License No. Address <b>Downs Km</b> Signed <b>Wendell Dalbey</b> <b>10-10-79</b> Date Authorized representative		
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

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30 NE 1/4 NW