

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

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|---|--------------|
| 1. Location of well: County <u>Cloud</u> Fraction <u>(1/4) 1/4 SW 1/4</u> Section number <u>30</u> Township number <u>T 5 S R 2 E/W</u> Range number | |
| 2. Distance and direction from nearest town or city: <u>3 miles east of Concordia 1 mile north east side of road</u> Street address of well location if in city: | |
| 3. Owner of well: <u>Vincent Charbonneau</u> R.R. or street: <u>Rt 3</u> City, state, zip code: <u>Concordia Kansas 66901</u> | |
| 4. Locate with "X" in section below: Sketch map: | |
| 6. Bore hole dia. <u>30</u> in. Completion date <u>Nov. 11, 1975</u> Well depth <u>52</u> ft. | |
| 7. 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: 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 | |
| 9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded _____ Surface <u>12</u> in. RMP <u>16</u> PVS _____ Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>52</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <u>0.75</u> | |
| 10. Screen: Manufacturer's name <u>Johnson Well Casing</u> Type <u>Transite</u> Dia. <u>16"</u> Slot/gauze <u>3/32</u> Length <u>26</u> Set between <u>26</u> ft. and <u>52</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4"</u> | |
| 11. Static water level: <u>12</u> ft. below land surface Date <u>Nov. 12, 75</u> mo./day/yr. | |
| 12. Pumping level below land surfaces: <u>24</u> ft. after <u>1</u> hrs. pumping <u>650</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>1000</u> g.p.m. | |
| 13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>Nov. 15, 1975</u> mo./day/yr. | |
| 14. Well head completion: <u>NO</u> Pitless adapter <u>2ft</u> Inches above grade | |
| 15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement _____ Bentonite _____ Concrete _____ Depth: From <u>1</u> ft. to <u>10</u> ft. | |
| 16. Nearest source of possible contamination <u>Creek</u> ft. <u>50</u> Direction <u>North</u> Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 17. Pump: <u>Western Land Roller</u> Not installed Manufacturer's name _____ Model number <u>8"</u> HP <u>END 504</u> Length of drop pipe <u>49</u> ft. capacity <u>1200</u> g.p.m. Type: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____ | |
| (Use a second sheet if needed) | |
| 18. Elevation: _____ Topography: _____ Hill _____ Slope _____ Upland _____ Valley <input checked="" type="checkbox"/> | 19. Remarks: |
| 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>Carl Thomas, E.O.P.</u> 247 Business name _____ License No. _____ Address <u>333 E 16th St Concordia, Kans.</u> Signed <u>Carl Thomas</u> Date <u>July 10, 1975</u> Authorized representative | |

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

Form WWC-5