

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>Cloud</u>	Fraction <u>NW 1/4 NW 1/4 NW 1/4</u>	Section number <u>11</u>	Township number <u>T 5 S</u>	Range number <u>R 3 E</u>
2. Distance and direction from nearest town or city: <u>3 E - 2 N of Concordia</u>		3. Owner of well: <u>DON LEWIS</u>			
Street address of well location if in city:		City, state, zip code: <u>Concordia, Mo 64601</u>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date <u>2/24/78</u>	
				Well depth <u>233</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>Plastic</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>15</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>15</u> lbs./ft. Dia. <u>5</u> in. to <u>233</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>233</u> ft. depth gage No. <u>44</u>	
5. Type and color of material		From	To	10. Screen: Manufacturer's name <u>Captex</u>	
<u>Black soil</u>		<u>0</u>	<u>8</u>	Type <u>160</u> Dia. <u>5</u>	
<u>Small white Rock</u>		<u>9</u>	<u>22</u>	Slot/gauze <u>3/16</u> Length <u>30 ft</u>	
<u>Grey clay</u>		<u>23</u>	<u>45</u>	Set between <u>26 3/4</u> ft. and <u>23 3/4</u> ft.	
<u>Black shale + coal</u>		<u>46</u>	<u>89</u>	Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 in</u>	
<u>Sandstone</u>		<u>90</u>	<u>115</u>	11. Static water level: <u>135</u> ft. below land surface Date <u>8/26/78</u>	
<u>Grey clay</u>		<u>116</u>	<u>152</u>	12. Pumping level below land surfaces: <u>180</u> ft. after <u>2</u> hrs. pumping <u>7</u> g.p.m. <u>116</u> ft. after <u>1</u> hrs. pumping <u>10</u> g.p.m.	
<u>Red clay</u>		<u>153</u>	<u>187</u>	Estimated maximum yield <u>10</u> g.p.m.	
<u>Sandstone</u>		<u>188</u>	<u>233</u>	13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>8/26/78</u>	
				14. Well head completion: <u>NO</u>	
				Fittless adapter <input type="checkbox"/> Inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/>	
				With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete	
				Depth: From <u>17</u> ft. to <u>22</u> ft.	
				16. Nearest source of possible contamination: ft. <u>4 ft</u> Direction <u>West</u> Type <u>Pond</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 <u>McQuay-Norris</u>	
				Model number <u>52810</u> HP <u>1</u> Volts <u>220</u>	
				Length of drop pipe <u>216</u> ft. capacity <u>12</u> g.p.m.	
				Type: <input checked="" 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 checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
			Signature <u>Carl Thomas E. Sen</u> License No. <u>247</u>		
			Business name <u>333 E 16 Concordia, KS</u>		
			Signature <u>William Thomas</u> Date <u>8/26/78</u>		

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

Form WWC-5