

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 Cloud | Fraction SE 1/4 SW 1/4 NE 1/4 | Section number 22 | Township number T. 5 S. R. 3 E. | Range number 3 |
| 2. Distance and direction from nearest town or city: 2 miles north of Concordia | | 3. Owner of well: Ruth Sherwood RFD 2 Concordia, Mo 66901 | | | |
| Street address of well location if in city: Concordia, Mo 66901 | | City, state, zip code: Concordia, Mo 66901 | | | |
| 4. Locate with "X" in section below: | | Sketch map: | | 6. Bore hole dia. 7 in. Completion date 6/30/77 Well depth 41 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 | | | | 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 _____ Height: Above or below Threaded _____ Welded _____ Surface 12 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 4 1/2 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 44 | |
| | | | | 10. Screen: Manufacturer's name Casey Tex Type 160 Dia. _____ Slot/gauze 3/16 Length 20 Set between 21 ft. and 41 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 4/4 in. | |
| | | | | 11. Static water level: _____ mo./day/yr. 20 ft. below land surface Date 6/30/77 | |
| | | | | 12. Pumping level below land surfaces: 28 ft. after 2 hrs. pumping 12 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 15 g.p.m. | |
| | | | | 13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date 6/30/77 | |
| | | | | 14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 14 inches above grade | |
| | | | | 15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 1 ft. to 10 ft. | |
| | | | | 16. Nearest source of possible contamination: ft. 160 Direction East Type Domestic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | 17. Pump: _____ Not installed Manufacturer's name _____ Model number S28588 Volts 220 Length of drop pipe 30 ft. capacity 15 g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine <input type="checkbox"/> Jet _____ Reciprocating <input type="checkbox"/> Centrifugal _____ Other | |
| 18. Elevation: 1340 | | 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. CARL THOMAS & SON 247 Business name _____ License No. _____ Address 333 E 16th Concordia, Kansas Carl Thomas _____ Date 9/20/77 Authorized representative | |

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

Form WWC-5

T. 5 S. R. 3 E. Sec 22 SE 1/4 SW 1/4