

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 SW 1/4 SE 1/4</u>	Section number <u>36</u>	Township number T <u>5</u> S R <u>3</u> E <u>N</u>	Range number																				
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>2 E. Concordia</u>			3. Owner of well: <u>Frank Carlson</u> R.R. or street: City, state, zip code: <u>Concordia Ks 66901</u>																						
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>3 1/2</u> in. Completion date <u>7-1-78</u> Well depth <u>50</u> ft.																					
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">5. Type and color of material</td> <td style="width:10%;">From</td> <td style="width:10%;">To</td> <td style="width:30%;">10. Screens: Manufacturer's name <u>Johnson Concrete</u> Type <u>transit</u> Dia. <u>16</u> Slot/gauge <u>1/8</u> Length <u>26</u> Set between <u>24</u> ft. and <u>50</u> ft. Gravel pack? <u>YES</u> Size range of material <u>1/8-1/4</u></td> </tr> <tr> <td><u>top soil + clay</u></td> <td><u>0</u></td> <td><u>30</u></td> <td rowspan="5"> 11. Static water level: <u>28</u> ft. below land surface Date <u>7-1-78</u> 12. Pumping level below land surfaces: <u>45</u> ft. after <u>1</u> hrs. pumping <u>500</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>500</u> g.p.m. 13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u> 14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade 15. Well grouted? <u>YES</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft. 16. Nearest source of possible contamination: <u>NONE</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>WLR</u> Model number <u>6M</u> HP <u> </u> Volts <u> </u> Length of drop pipe <u>47</u> ft. capacity <u>500</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other </td> </tr> <tr> <td><u>sand + gravel</u></td> <td><u>30</u></td> <td><u>42</u></td> </tr> <tr> <td><u>gravel</u></td> <td><u>42</u></td> <td><u>47</u></td> </tr> <tr> <td><u>sand rock</u></td> <td><u>47</u></td> <td><u>50</u></td> </tr> <tr> <td><u>red clay</u></td> <td><u>50</u></td> <td><u>60</u></td> </tr> </table>		5. Type and color of material	From	To	10. Screens: Manufacturer's name <u>Johnson Concrete</u> Type <u>transit</u> Dia. <u>16</u> Slot/gauge <u>1/8</u> Length <u>26</u> Set between <u>24</u> ft. and <u>50</u> ft. Gravel pack? <u>YES</u> Size range of material <u>1/8-1/4</u>	<u>top soil + clay</u>	<u>0</u>	<u>30</u>	11. Static water level: <u>28</u> ft. below land surface Date <u>7-1-78</u> 12. Pumping level below land surfaces: <u>45</u> ft. after <u>1</u> hrs. pumping <u>500</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>500</u> g.p.m. 13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u> 14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade 15. Well grouted? <u>YES</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft. 16. Nearest source of possible contamination: <u>NONE</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>WLR</u> Model number <u>6M</u> HP <u> </u> Volts <u> </u> Length of drop pipe <u>47</u> ft. capacity <u>500</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	<u>sand + gravel</u>	<u>30</u>	<u>42</u>	<u>gravel</u>	<u>42</u>	<u>47</u>	<u>sand rock</u>	<u>47</u>	<u>50</u>	<u>red clay</u>	<u>50</u>	<u>60</u>	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	
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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		9. Casing: Material <u>AC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>34</u> lbs./ft. Dia. <u>16</u> in. to <u>50</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>3/4"</u>																							
18. Elevation <u>1320'</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Re-AM replacement well		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>COX-BESWICK</u> <u>361</u> Business name <u>Francis W. Clifton</u> License No. <u> </u> Address <u> </u> Signed <u>Francis W</u> Date <u>7-26-78</u> Authorized representative																					

5-30-36
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5