

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 NW 1/4 SE 1/4	Section number: 15	Township number: T 6 S R 1 E	Range number: 1 E
2. Distance and direction from nearest town or city: 5 1/2 - 1/4 W			3. Owner of well: HERMAN KOCH		
Street address of well location if in city: CLYDE			R.R. or street: RFD		
4. Locate with "X" in section below:			Sketch map:		
			6. Bore hole dia. 8 in. Completion date: 5/19/74 Well depth 97 ft.		
5. Type and color of material			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 type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material PVC (Height) <input type="checkbox"/> Above or below <input checked="" type="checkbox"/> Threading <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <input type="checkbox"/> Dia. 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 2 lbs./ft. Dia. 5 in. to 97 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 214		
			10. Screen: Manufacturer's name PUMPCO Type PVC Dia. 5" Slot gauge 1/16" Length 20' Set between 97 ft. and 77 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material 1/4" x 1/8"		
			11. Static water level: 35 ft. below land surface Date 5/19/74 mo./day/yr.		
			12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 2.5 g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____ mo./day/yr.		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> <input type="checkbox"/> Inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> YES With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
			16. Nearest source of possible contamination: ft. 500 Direction WEST Type COOK Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			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		
(Use a second sheet if needed)					
18. Elevation: 1345		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.	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley				Business name: GEO COX & SONS INC 258 License No. _____ Address: CLIFTON, KANSAS Signed: David Cox Date: 5/19/74 Authorized Representative	

1-10-74
 R
 15
 SENEUSE
 1/4 1/4 1/4

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

Form WWC-5