

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>22</u>	Township number <u>T 6 S R 1 E (NW)</u>	Range number
2. Distance and direction from nearest town or city:	<u>5 S of Clyde</u>		3. Owner of well: <u>Bernard Chaney</u>		
Street address of well location if in city:			R.R. or street: <u>#1 Clyde, Kansas 66938</u>		
4. Locate with "X" in section below:			Sketch map:		
			6. Bore hole dia. <u>30</u> in. Completion date _____ Well depth <u>146</u> ft. <u>6-8-76</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		
			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 <u>below</u> 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>146</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>3/4</u>		
5. Type and color of material			From	To	10. Screen: Manufacturer's name <u>Johnson</u>
<u>top soil + clay</u>			<u>0</u>	<u>36</u>	Type <u>transit</u> Dia. <u>16</u>
<u>sand rock</u>			<u>36</u>	<u>40</u>	Slot/gauge <u>1/8</u> Length <u>39</u>
<u>sand rock + clay</u>			<u>40</u>	<u>48</u>	Set between <u>107</u> ft. and <u>146</u> ft. ft. and _____ ft.
<u>clay in sandrock</u>			<u>48</u>	<u>54</u>	Gravel pack? <u>YES</u> Size range of material <u>1/8-1/4</u>
<u>clay</u>			<u>54</u>	<u>64</u>	11. Static water level: _____ mo./day/yr. <u>40</u> ft. below land surface Date <u>6-8-76</u>
<u>sand rock</u>			<u>64</u>	<u>126</u>	12. Pumping level below land surfaces: <u>90</u> ft. after <u>1</u> hrs. pumping <u>1050</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>1500</u> g.p.m.
<u>trace of clay</u>			<u>126</u>	<u>126</u>	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
<u>sand rock</u>			<u>126</u>	<u>145</u>	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade
<u>clay</u>			<u>145</u>	<u>152</u>	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. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
					17. Pump: _____ Not installed Manufacturer's name <u>Lucy's</u> Model number <u>L8C</u> HP <u>80</u> Volts _____ Length of drop pipe <u>142</u> ft. capacity <u>1000</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
18. Elevation: <u>275</u>	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>Bern Chaney & Sons Inc 258</u> Business name License No. _____ Address <u>Clyde, Kansas 66938</u> Signed <u>Thomas Lee</u> Date <u>6-8-76</u> Authorized representative		

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

Form WWC-5

60
 10
 22
 1/4
 1/4
 7/4
 NW 1/4 SE 1/4