

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 OSBORNE	Fraction SW 1/4 SW 1/4 SW 1/4	Section number 9	Township number T 7 S R 13 E/W	Range number
2. Distance and direction from nearest town or city: 1/8 E			3. Owner of well: RAYMOND FOSTER			
Street address of well location if in city: BLOOMINGTON			R.R. or street: RR - 2			
4. Locate with "X" in section below:			Sketch map:			6. Bore hole dia. 10 in. Completion date 6-16-80 Well depth 54 ft.
			<p style="text-align: center;">HOUSE □</p> <p style="text-align: center;">WELL ⊙</p> <p style="text-align: center;">□ BARN</p>			7. 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
5. Type and color of material			From	To	9. Casing: Material PTLS Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 14 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 44 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 0.320	
					10. Screen: Manufacturer's name _____ Type RMP Dia. 5 Slot/gauze 1/8" Length 10' Set between 44 ft. and 54 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material 1/8"	
					11. Static water level: _____ mo./day/yr. 3.5 ft. below land surface Date 6-16-80	
					12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
					14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> YES With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 4 ft. to 14 ft.	
					16. Nearest source of possible contamination: ft. 70 Direction S Type BARN 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:	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. D&D SERVICE 108 Business name _____ License No. _____ Address Downs Hs. Signed Wendell Derby Date 6-16-80 Authorized representative			
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T-7
 R-13
 W-9
 Sec
 1/4
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 1/4
 SUSASU

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

Form WWC-5