

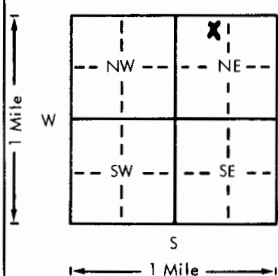
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

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1. Location of well: County <u>Graham</u> Fraction <u>NE 1/4 NW 1/4 NE 1/4</u> Section number <u>31</u> Township number <u>T 7 S R 25 E 10</u>	
2. Distance and direction from nearest town or city: <u>4 1/2 E of Studly</u> 3. Owner of well: <u>Kenneth Best</u> Street address of well location if in city: _____ City, state, zip code: <u>Hill City</u>	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole dia. <u>9</u> in. Completion date <u>8-27-79</u> Well depth <u>130</u> ft.	
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 _____ Height: Above or below Threaded _____ Welded _____ Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>20.0 lbs./ft.</u> Dia. <u>0</u> in. to <u>130</u> ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>7</u>	
5. Type and color of material	10. Screen: Manufacturer's name _____ Type <u>TPVC</u> Dia. <u>5"</u> Slot/gauze <u>1/32</u> Length <u>8'</u> Set between <u>130</u> ft. and <u>122</u> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>2-1/4" - 3/4"</u>
<u>Top soil</u>	11. Static water level: _____ mo./day/yr. <u>69</u> ft. below land surface Date <u>8-27-79</u>
<u>Sand stone</u>	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>30</u> g.p.m.
<u>Sandy clay</u>	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
<u>Sand stone</u>	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
<u>Sandy clay</u>	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.
<u>Fine sand</u>	16. <input checked="" type="checkbox"/> Nearest source of possible contamination: ft. <u>500</u> Direction <u>West</u> Type <u>Run</u> Well disinfected upon completion? Yes <input type="checkbox"/> No <input type="checkbox"/>
<u>Fine sand M gravel</u>	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
<u>M. gravel, gravel</u>	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>B+B Drilling</u> <u>376</u> Business name License No. Address <u>WINNECH, KS</u> Signed <u>Joseph Beckman</u> Date <u>8-27-79</u> Authorized representative
<u>Ochre</u>	
<u>BRUCK 129'</u>	
<u>69</u>	
<u>60' sat thick</u>	
<u>in Og</u>	
(Use a second sheet if needed)	
18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>Farmer finished own well.</u> <u>Reason for delay farmer decided to finish own well</u> <u>2500'</u>

7 256 31 NE 1/4 1/4 1/4

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

Form WWC-5