

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 <i>Shelton</i>	Fraction <i>NW 1/4 SE 1/4 SE 1/4</i>	Section number <i>9</i>	Township number T <i>7</i> S R <i>27</i> E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <i>Dale Burt</i> R.R. or street: City, state, zip code: <i>Hopie Kansas 67740</i>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <i>28</i> in. Completion date <i>8-22-77</i> Well depth <i>236</i> ft.		
		<p>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</p> <p>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</p> <p>9. Casing: Material <i>Steel</i> Height: (Above or below) Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>12</i> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia <i>16</i> in. to <i>236</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <i>184</i></p>		10. Screen: Manufacturer's name _____ <i>W A Brown</i> Type <i>LUVER</i> Dia. <i>16</i> Slot/gauze <i>7/8</i> Length <i>60</i> Set between <i>176</i> ft. and <i>236</i> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>4x7/8</i>		
				11. Static water level: _____ mo./day/yr. <i>156</i> ft. below land surface Date <i>8-15-77</i>		
5. Type and color of material		From	To	12. Pumping level below land surfaces: <i>150</i> ft. after <i>3</i> hrs. pumping <i>700</i> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>1100</i> g.p.m.		
<i>Top soil</i>		<i>0</i>	<i>115</i>	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
<i>Fine sand M Gravel Clay</i>		<i>105</i>	<i>115</i>	14. Well head completion: <input type="checkbox"/> Pitless adapter <i>12</i> Inches above grade		
<i>Clay Sandy Clay Sand stone</i>		<i>125</i>	<i>145</i>	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.		
<i>Clay</i>		<i>145</i>	<i>185</i>	16. Nearest source of possible contamination: ft. _____ Direction _____ Type <i>NONE</i> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>Fine sand M Gravel Sandy Clay</i>		<i>185</i>	<i>205</i>	17. Pump: _____ Not installed Manufacturer's name <i>GOULPS</i> Model number <i>12 JTC</i> HP <i>100</i> Volts _____ Length of drop pipe <i>225</i> ft. capacity _____ 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		
<i>Clay</i>		<i>205</i>	<i>215</i>	(Use a second sheet if needed)		
<i>Clay</i>		<i>215</i>	<i>225</i>			
<i>Fine sand M Gravel</i>		<i>225</i>	<i>235</i>	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. <i>Blair Jay Drilling Co. Inc 214</i> Business name _____ License No. _____ Address <i>Box 503 Colby Ko</i> Signed <i>Marilyn Kell</i> Date <i>5-26-78</i> Authorized representative		
<i>Clay</i>		<i>235</i>	<i>236</i>			
<i>Ocher Shale</i>		<i>236</i>	<i>237</i>			
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5