

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>Mitchell</u>		Fraction <u>SE 1/4</u>		Section number <u>20</u>		Township number T <u>7</u> S <u>R</u>		Range number <u>6</u> <u>W</u>	
2. Distance and direction from nearest town or city: <u>5 SE</u>				3. Owner of well: <u>Sohomon Valley Feed Lot, Beloit, KS</u>					
Street address of well location if in city: <u>Beloit, KS.</u>				City, state, zip code: <u>Beloit, KS</u>					
4. Locate with "X" in section below:				Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date <u>6-23-75</u> Well depth <u>23</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			
5. Type and color of material				From		To		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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other <u>observer</u>	
<u>clay</u>				<u>0</u>		<u>23</u>		9. Casing: Material <u>PVC</u> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>23</u> ft. depth; Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth; gage No. <input type="checkbox"/>	
								10. Screen: Manufacturer's name <u>MPI</u> Type <u>PVC</u> Dia. <u>5"</u> <input checked="" type="checkbox"/> gauze <u>1/8"</u> Length <u>10'</u> Set between <u>18</u> ft. and <u>23</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-3/4"</u>	
								11. Static water level: <u>7</u> ft. below land surface Date <u>6-23-75</u> 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 <u>1</u> g.p.m.	
								13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/>	
								14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade	
								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.	
								16. Nearest source of possible contamination: ft. <u>10'</u> Direction <u>SE</u> Type <u>lagoon</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
								17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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: <u>Observation Well</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>Kelly's Water Well Service</u> Business name <u>R 2 Great Bend, KS</u> License No. <u>1/4 1/4 1/4</u> Address <u>Beloit, KS</u> Signed <u>Kelly Price</u> Date <u>11-19-75</u> Authorized representative					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley									

- 7 - 6 W 2 0 SE SE W 1/4 SE

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

Form WWC-5