

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 Rooks	Fraction NE 1/4 NE 1/4 NE 1/4	Section number 15	Township number T 8 S R 19 E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city: 1 3/4 MI. So WEBSTER				3. Owner of well: SCHNEIDER RANCH R.R. or street: City, state, zip code: STOCKTON, KANSAS		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 in. Completion date 3-6-76 Well depth 37 ft.		
		<p>7. <input 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</p>		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		
5. Type and color of material		From		To		9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface 24 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 37 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gauge No. 200
Black Dirt		0		8		10. Screen: Manufacturer's name _____ Type PVC Dia. 5" Slot/gauze 1/8 Length 10' Set between 27 ft. and 37 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8 to 1/4
CLAY		8		30		11. Static water level: _____ mo./day/yr. 29 ft. below land surface Date 3-6-76
Water Bearing SAND		30		37		12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.
						13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
						14. Well head completion: <input type="checkbox"/> Pitless adapter 24 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 20 ft. to 10 ft.
						16. Nearest source of possible contamination: ft. 10 Direction West Type HAND DUG well 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:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	<p>Farmer is going to complete well sometime later. He didn't know what he was going to do with it. Also he is going</p>		<p>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Paul J Well Drilling 269A Business name _____ License No. _____ Address Box 42 Palco 18 Signed Paul J Well Date 3-8-76 Authorized representative</p>			

Forward the white, blue and pink copies to the Department of Health and Environment
To fill up HAND DUG well.

Form WWC-5

T 8 S R 19 E
 Sec 15
 1/4 1/4 1/4 1/4
 SE 1/4 NE 1/4