

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

FOUR

ADD

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>Graham</u> | | Fraction <u>SE 1/4 SE 1/4 NE 1/4</u> | | Section number <u>20</u> | | Township number T <u>8</u> S R <u>23</u> E/W | | Range number | |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: <u>1 1/2 m S, + 3/4 W of Hill City</u> | | | | 3. Owner of well: <u>Charles Chipman</u> R.R. or street: <u>114 E Cedar</u> City, state, zip code: <u>Hill City, Kan</u> | | | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile 1 Mile | | | | Sketch map: <u>X well</u> <u>HSOI</u> <u>Food hot</u> <u>DRAINAGE</u> | | 6. Bore hole dia. <u>9</u> in. Completion date <u>2-17-77</u> Well depth <u>26</u> ft. | | | |
| 5. Type and color of material | | | | From | | To | | 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 | |
| <u>clay</u> | | | | <u>0</u> | | <u>7</u> | | 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 | |
| <u>blue & white sand</u> | | | | <u>7</u> | | <u>25</u> | | 9. Casing: Material <u>plastic</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>26</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>1250</u> | |
| <u>Hard gray shale</u> | | | | <u>25</u> | | <u>26</u> | | 10. Screen: Manufacturer's name <u>Jess</u> <u>Lowell</u> Type <u>plastic</u> Dia. <u>54</u> mm Slot gauge <u>1/16</u> Length <u>10</u> ft. Set between <u>16</u> ft. and <u>26</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/2 to 3/8</u> | |
| <u>10</u> | | | | | | | | 11. Static water level: <u>10</u> ft. below land surface Date <u>12-17-77</u> <u>mmc</u> | |
| <u>15' sat. thick</u> | | | | | | | | 12. Pumping level below land surfaces: <u>20</u> ft. after <u>20</u> hrs. pumping <u>g.p.m.</u> <u>g.p.m.</u> Estimated maximum yield <u>g.p.m.</u> | |
| <u>NOT in Og</u> | | | | | | | | 13. Water sample submitted: <u>g.p.m.</u> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u>g.p.m.</u> | |
| <u>location difficult to spot because elevation varies rapidly on top.</u> <u>1/4 m</u> | | | | | | | | 14. Well head completion: <u>done by us</u> <u>inches</u> above grade | |
| | | | | | | | | 15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>6</u> ft. to <u>10</u> ft. | |
| | | | | | | | | 16. Nearest source of possible contamination: <u>Food</u> ft. <u>150</u> Direction <u>SW</u> Type <u>lot</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | | | | 17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u>g.p.m.</u> Model number <u>g.p.m.</u> HP <u>g.p.m.</u> Volts <u>g.p.m.</u> Length of drop pipe <u>g.p.m.</u> ft. capacity <u>g.p.m.</u> 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | | 19. Remarks: <u>OWNER TO PUT IN CONCRETE SLAB</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>Dik Drilling Co 303</u> Business name <u>Hill City, Kan</u> License No. <u>g.p.m.</u> Address <u>g.p.m.</u> Signed <u>Allen</u> Date <u>11-18-77</u> Authorized representative | | | |

1-8
2-30
2-0
SE SE NE
1/4 1/4 1/4

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

Form WWC-5