

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

ADB

1. Location of well:		County <i>Sheridan</i>	Fraction <i>NW 1/4 SW 1/4 NE 1/4</i>	Section number <i>14</i>	Township number T <i>8</i> S R	Range number R <i>27</i> E/W <i>X</i>
2. Distance and direction from nearest town or city: <i>N 3/4</i>			3. Owner of well: <i>al Weeks</i>			
Street address of well location if in city: <i>Jasco Ks.</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>20</i> in. Completion date <i>3-29-76</i> Well depth <i>56</i> ft.	
					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	
5. Type and color of material			From	To	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	
<i>Top Soil</i>			<i>0</i>	<i>20</i>	9. Casing: Material <i>Steel</i> Height <input checked="" type="checkbox"/> 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 <input type="checkbox"/> lbs./ft. Dia. <i>0</i> in. to <i>56</i> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <i>1156</i>	
<i>Thin sand med gravel loose color</i>			<i>20</i>	<i>35</i>	10. Screen: Manufacturer's name <i>W. A. Brown</i> Type <i>louver</i> Dia. <i>12 3/4</i> Slot/gauze <i>7-18</i> Length <i>20</i> Set between <i>36</i> ft. and <i>56</i> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>14 x 98</i>	
<i>" " " "</i>			<i>35</i>	<i>48</i>	11. Static water level: <input type="checkbox"/> mo./day/yr. <i>12</i> ft. below land surface Date <i>4-2-76</i>	
<i>" " loose color</i>			<i>48</i>	<i>52</i>	12. Pumping level below land surfaces: <i>54</i> ft. after <i>2</i> hrs. pumping <i>1200</i> g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <i>1200</i> g.p.m.	
<i>ochre dark shale</i>			<i>52</i>	<i>60</i>	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date	
<i>BROCK 52'</i>					14. Well head completion: <input type="checkbox"/> Pitless adapter <i>12</i> Inches above grade	
					15. Well grouted? <i>yes</i> 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.	
					16. Nearest source of possible contamination: ft. ____ Direction ____ Type <i>None</i> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
					17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <i>QuilDS</i> Model number <i>8X1642</i> HP <i>40</i> Volts <i>440</i> Length of drop pipe <i>50</i> ft. capacity <i>600</i> 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	
					(Use a second sheet if needed)	
18. Elevation:		19. Remarks:		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>Blue Jay Drilling Co. Inc. 214</i> Business name License No. Address <i>Colby Kansas</i> Signed <i>Marilyn Rall</i> Date <i>5-12-76</i> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

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