

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

BARB

1. Location of well: <i>Fossilat</i>		County <i>Shelburne</i>	Fraction <i>NW 1/4 NE 1/4 NW 1/4</i>	Section number <i>23</i>	Township number T <i>8</i> S R <i>27</i> E/W	Range number
2. Distance and direction from nearest town or city: <i>8E</i>			3. Owner of well: <i>Herold Taylor</i>			
Street address of well location if in city: <i>Acacia</i>			R.R. or street: City, state, zip code: <i>R. Acacia Ks.</i>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <i>9</i> in. Completion date <i>10-21-75</i> Well depth <i>103</i> 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		
				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		
				9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface <i>4'</i> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. <i>5</i> in. to <i>103</i> ft. depth gage No. <i>200</i>		
5. Type and color of material				From	To	10. Screen: Manufacturer's name <i>Jess Lawrence</i>
<i>Top soil</i>				<i>0</i>	<i>32</i>	Type <i>Doc</i> Dia. <i>5</i>
<i>river mud</i>				<i>32</i>	<i>50</i>	Slot/gauze <i>1/32</i> Length <i>8'</i>
<i>fine sand</i>				<i>50</i>	<i>52</i>	Set between <i>94</i> ft. and <i>102</i> ft.
<i>fine sand + sandy clay</i>				<i>52</i>	<i>57</i>	ft. and _____ ft.
<i>gravel</i>				<i>57</i>	<i>65</i>	Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>18-1/4</i>
<i>fine sand + sandy clay</i>				<i>65</i>	<i>83</i>	11. Static water level: _____ mo./day/yr. <i>20</i> ft. below land surface Date <i>10-21-75</i>
<i>m. gravel</i>				<i>83</i>	<i>89</i>	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.
<i>gravel river mud.</i>				<i>89</i>	<i>98</i>	Estimated maximum yield <i>30</i> g.p.m.
<i>gravel</i>				<i>98</i>	<i>102</i>	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
<i>Ochre</i>				<i>102</i>	<i>103</i>	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <i>12</i> Inches above grade
<i>BROCK 102'</i>						15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.
						16. Nearest source of possible contamination: ft. <i>100</i> Direction <i>South</i> Type <i>Fossilat</i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No
						17. Pump: _____ Not installed Manufacturer's name <i>Grundfos</i> Model number <i>25E6</i> HP <i>2</i> Volts <i>130</i> Length of drop pipe <i>94</i> ft. capacity <i>25</i> g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine <input type="checkbox"/> Jet _____ Reciprocating <input type="checkbox"/> Centrifugal _____ Other
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>Stueckhoff</i> <i>298</i> Business name _____ License No. _____ Address <i>Grassland Ks.</i> Signed <i>Stueckhoff</i> Date <i>7-29-76</i> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input 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