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

DCC

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 Sheridan Fraction SW 1/4 SW 1/4 SE 1/4 Section number 6 Township number T 8 S R 28 E/W Range number

2. Distance and direction from nearest town or city: Street address of well location if in city: 2 W - 1 N - 3 W

3. Owner of well: Jonnie M + Glad Houston R.R. or street: PO Box 241 City, state, zip code: Hoese Kansas

4. Locate with "X" in section below: Sketch map:

6. Bore hole dia. 8 1/2 in. Completion date 8-10-76 Well depth 243 ft.

7. Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary

8. Use: Domestic Public supply Industry Irrigation Air conditioning Stock Lawn Oil field water Other

9. Casing: Material PVC Height: Above or below Threaded Welded Surface 2 1/4 in. RMP PVC Weight 1.5 lbs./ft. Dia. in. to ft. depth Wall thickness: inches or Dia. in. to ft. depth gage No. 250

10. Screen: Manufacturer's name _____ Type RMP Dia. 5 " Slot/gauze _____ Length _____ Set between 218 1/2 ft. and 243 ft. Gravel pack? Size range of material 5-4

11. Static water level: _____ mo./day/yr. 120 ft. below land surface Date 8-10-76

12. Pumping level below land surfaces: _____ ft. after 1 hrs. pumping 12 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 175 g.p.m.

13. Water sample submitted: _____ mo./day/yr. Yes No Date 8-1-76

14. Well head completion: _____ Pitless adapter _____ Inches above grade

15. Well grouted? yes With: _____ Neat cement _____ Bentonite Concrete Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination: _____ ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes No

17. Pump: Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____

18. Elevation: _____

19. Remarks: Flint & Clay Yellow 236 240 Shale Dark Blue 240 248 BRock 239

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. Q.B. water well Drilling Supply 294 Business name _____ License No. _____ Address 2022 City Kansas Signed Paul G. Brantley Date _____ Authorized representative

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

Form WWC-5

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