

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 Sheridan	Fraction NW SE SE 1/4 1/4 1/4	Section number 21	Township number T 8 S R	Range number 28 E/W
2. Distance and direction from nearest town or city: 1 South 1/4 West of Hoxie, Ks. Street address of well location if in city:			3. Owner of well: Dick White R.R. or street: Rt. 2 City, state, zip code: Hoxie, Ks. 67740		
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. 2 1/2 in. Completion date 5-18-80 Well depth 215 ft.		
			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		
			8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input 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		
5. Type and color of material			9. Casing: Material Styrene Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 1 1/2 in. RMP 5 PVC 215 Weight 1.75 lbs./ft. Dia. 5 in. to 2 1/2 ft. depth Wall Thickness 1/4 inches or Dia. 5 in. to 2 1/2 ft. depth gauge No. 214		
			10. Screen: Manufacturer's name _____ Type Styrene Dia. 5 in. Slot/gauze slot Length 215 Set between 195 ft. and _____ ft. _____ ft. and _____ 1/4 in. ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material _____		
			11. Static water level: _____ 122 ft. below land surface Date 5-18-80 ms./day/yr.		
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ 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 checked="" type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement 15 ft. Bentonite _____ Concrete _____ Depth: From _____ ft. to _____ ft.		
			16. Nearest source of possible contamination: 125 ft. Direction South Type Sewer 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: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. F & W Drilling 394 A Business name Rt. 1 Hoxie, Ks. License No. 67740 Address _____ Signed Walter W. [Signature] Date _____ Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

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

Form WWC-5