

Sent 7-8-77

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
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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>Cloud</u>	Fraction <u>CE 1/4 SW 1/4 NE 1/4</u>	Section number <u>14</u>	Township number <u>8</u>	Range number <u>5</u>	EW <u>W</u>
2. Distance and direction from nearest town or city: <u>East of business Section &amp; North 3/4</u>		3. Owner of well: <u>Dallas Adams</u>				
Street address of well location if in city: <u>300 NORTH FISHER ST.</u>		R.R. or street: <u>300 NORTH FISHER</u> City, state, zip code: <u>GLASCO, KANSAS</u>				
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. <u>4 1/2</u> in. Complete date: <u>APRIL 8 1977</u> Well depth <u>45</u> 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 type="checkbox"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
				9. Casing: Material <input type="checkbox"/> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>10</u> lbs./ft. Dia. <u>5</u> in. to <u>4 1/2</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>4 1/2</u> ft. depth gage No. <u>250</u> m No		
5. Type and color of material		From	To	10. Screen: Manufacturer's name <u>CAN-TEX</u>		
<u>Black soil</u>		<u>0</u>	<u>10</u>	Type <u>16</u> Dia. <u>5</u> in.		
<u>lime rock</u>		<u>10</u>	<u>25</u>	Slot/gauze <u>3/16</u> Length <u>40</u>		
<u>Gravel</u>		<u>25</u>	<u>44</u>	Set between <u>35</u> ft. and <u>45</u> ft.		
<u>CLAY</u>		<u>45</u>		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4</u>		
				11. Static water level: <u>35</u> ft. below land surface Date <u>4/8/77</u>		
				12. Pumping level below land surfaces: <u>39</u> ft. after <u>1</u> hrs. pumping <u>6</u> g.p.m. <u>  </u> ft. after <u>  </u> hrs. pumping <u>  </u> g.p.m. Estimated maximum yield <u>10</u> g.p.m.		
				13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>4/20/77</u>		
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
				15. Well grouted? With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>8</u> ft. to <u>18</u> ft. / to 10 m		
				16. Nearest source of possible contamination: ft. <u>100</u> Direction <u>East</u> Type <u>Sewer</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>  </u> Model number <u>  </u> HP <u>  </u> Volts <u>  </u> Length of drop pipe <u>  </u> ft. capacity <u>  </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: <u>135</u> Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>Backyard for garden use</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>CARL THOMAS &amp; SON</u> 247 Business name <u>333 1/2 Concordia KS</u> License No. <u>  </u> Authorized representative <u>Armen Thomas</u> Date <u>4/18/77</u>		

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

Form WWC-5