

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 Rocks		Fraction SW 1/4 SW 1/4 SW 1/4		Section number 16		Township number T 9 S R		Range number 17 E/W	
2. Distance and direction from nearest town or city: PLAINVILLE KS				3. Owner of well: TRACY THOMPSON					
Street address of well location if in city: 4 MILE EAST 2 MILE NORTH				R.R. or street: RR #2					
				City, state, zip code: PLAINVILLE KANS 67463					
4. Locate with "X" in section below:				Sketch map:		6. Bore hole dia. 12 in. Completion date 9/14/78			
						Well depth 80 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 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			
						<input checked="" type="checkbox"/> Casing: Material T/L Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 250 lbs./ft. Dia. 6 in. to <input type="checkbox"/> ft. depth <input checked="" type="checkbox"/> Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 320			
5. Type and color of material				From		To		10. Screen: Manufacturer's name None	
CLAY + ROCK				0		15		used PERFORATED CASINGS	
GREEN SAND				15		60		<input checked="" type="checkbox"/> Type <input type="checkbox"/> Dia. 6 <input checked="" type="checkbox"/> Slot/gauze FIVE <input checked="" type="checkbox"/> Length 3 Set between 60 ft. and 80 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material CM 7	
WHITE SAND				60		75		11. Static water level: <input type="checkbox"/> mo./day/yr. 50 ft. below land surface Date 9/14/78	
BLUE SHALE				75		80		12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 5 g.p.m.	
								13. Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
								14. Well head completion: <input type="checkbox"/> Pitless adapter 24 Inches above grade	
								15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 15 ft.	
								16. Nearest source of possible contamination: None ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input 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	
								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. TONES BROS WATERWELL DRILLERS Business name _____ License No. _____ Address PLAINVILLE KANS Signed James P. Jones Date 9/14/78 Authorized representative	
18. Elevation:		19. Remarks: OWNER WILL FINISH WELL TO STATE REQUIREMENTS							
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley									

T 9 S R 17 E/W 16 SW SW SW

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

Form WWC-5