

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 <b>Rooks</b>		Fraction <b>1/4 SE 1/4 NE 1/4</b>		Section number <b>34</b>		Township number <b>T 9 S R 18 E 10</b>		Range number	
2. Distance and direction from nearest town or city: <b>S. W. 1/4 mile</b>				3. Owner of well: <b>Med Colburn</b>					
Street address of well location if in city: <b>1109 S.W. 9th</b>				R.R. or street: <b>1109 SW 9th</b>					
				City, state, zip code: <b>Plainville, Ks 67663</b>					
4. Locate with "X" in section below: Sketch map: <b>Test # 2</b>				6. Bore hole dia. <b>3</b> in. Completion date <b>8-9-10-77</b>					
				Well depth <b>50</b> 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 type="checkbox"/> Stock					
				<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other					
				9. Casing: Material <input type="checkbox"/> Height: Above or below					
				Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in.					
				RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft.					
				Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Wall Thickness: inches or					
				Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <input type="checkbox"/>					
5. Type and color of material <b>Test Hole 2</b>				From		To			
<b>Due North of Garage in Melon Patch</b>									
<b>Alluvial</b>				<b>0</b>		<b>6</b>			
<b>Brown Clay</b>				<b>6</b>		<b>30</b>			
<b>Fine sand</b>				<b>30</b>		<b>46</b>			
<b>Brown Clay</b>				<b>46</b>		<b>50</b>			
<b>Test # 2 presented no problems</b>									
<b>We used chlorinated gravel from</b>									
<b>bottom to 28' below ground surface</b>									
<b>We used neat cement from 28'</b>									
<b>to 3' below land surface,</b>									
<b>0'-3' Clay.</b>									
				10. Screen: Manufacturer's name <b>NA Casing Run</b>					
				Type <input type="checkbox"/> Dia. <input type="checkbox"/>					
				Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/>					
				Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft.					
				Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <b>Medium</b>					
				11. Static water level: <b>Test Hole # 2</b> mo./day/yr.					
				<input type="checkbox"/> ft. below land surface Date <b>No level</b>					
				12. Pumping level below land surfaces:					
				<input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.					
				<input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.					
				Estimated maximum yield <input type="checkbox"/> g.p.m.					
				13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>					
				14. Well head completion:					
				<input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade					
				15. Well grouted? <input checked="" type="checkbox"/> Yes <b>Plugged</b>					
				With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete					
				Depth: From <b>3</b> ft. to <b>28</b> ft.					
				16. Nearest source of possible contamination:					
				ft. <b>50+</b> Direction <b>SE</b> Type <b>lateral Field</b>					
				Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No					
				17. Pump: <input checked="" type="checkbox"/> Not installed					
				Manufacturer's name <input type="checkbox"/>					
				Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/>					
				Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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					
18. Elevation:				20. Water well contractor's certification:					
Topography:				This well was drilled under my jurisdiction and this report					
<input type="checkbox"/> Hill				is true to the best of my knowledge and belief.					
<input type="checkbox"/> Slope				<b>Water well also 2808</b>					
<input checked="" type="checkbox"/> Upland				Business name <input type="checkbox"/> License No. <input type="checkbox"/>					
<input type="checkbox"/> Valley				Address <b>East 5th</b>					
				Signed <b>Terry Gordon</b> Date <b>8-30</b>					
				Authorized representative					

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

Form WWC-5