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	Fraction	Section number	Township number	Range number
	Barton	SW 1/4 SW 1/4 SW 1/4	12	T 19 S	R 13 E/W

2. Distance and direction from nearest town or city:
5 miles Northeast of Great Bend, KS
Street address of well location if in city:

3. Owner of well: Dennis Bachand
R.R. or street: c/o Emery Bachand
City, state, zip code: Route 3 Great Bend, KS 67530

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

N
NW NE
W E
SW SE
x
S
1 Mile ← → 1 Mile

6. Bore hole dia. 9 in. Completion date 11-4-76
Well depth 240 ft.

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

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

9. Casing: Material Styrene Height: Above or below
Threaded ___ Welded X Surface 12 in.
RMP ___ PVC ___ Weight 1.5 lbs./ft.
Dia. 5 in. to 160 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 200#

5. Type and color of material	From	To
top soil	0	3
brown clay & limestone	3	57
BR→ Dakota Clay	57	120
sandstone & Dakota clay	120	130
Dakota Clay	130	160
Dakota clay & sandstone streaks	160	178
Dakota clay	178	188
Sandstone & Dakota clay streaks	188	240

(Use a second sheet if needed)

10. Screen: Manufacturer's name Jess & Lowell
Type Styrene 200 Dia. 5"
Slot/gauze 1/8" Length 80'
Set between 160 ft. and 240 ft.
___ ft. and ___ ft.
Gravel pack? yes Size range of material 3/8-200

11. Static water level: mo./day/yr.
99 ft. below land surface Date 11-4-76

12. Pumping level below land surfaces: N/C
___ 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.
__ Yes X No Date ___

14. Well head completion:
__ Pitless adapter 12 Inches above grade

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

16. Nearest source of possible contamination: NONE KNOWN
ft. ___ Direction ___ Type ___
Well disinfected upon completion? X Yes ___ No

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

18. Elevation:
Topography:
__ Hill
__ Slope
__ Upland
__ Valley

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.
Clarke Well & Equip. Inc. 185
Business name License No.
Address Great Bend, KS 67530
Signed D. W. Clarke Date 11-23-76
Authorized representative

T 19 R 13 E/W Sec 12 1/4 1/4 1/4 SW SW

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

Form WWC-5

MI-1023