USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Barton	Great-Bend	SE of SE	19	T19S	R13W

Distance and direction from nearest town or city:

Street address of well location if in city: 4100 Quail Creek, G.B.

3 Owner of well: Robert Dema
Address: 4100 Quail Creek
Great Bend, Kansas

Locate with "X" in section below:

Sketch map:

N
W E
S
1 Mile

4 Well depth: 45 ft. Date of completion 6-18-75
Well diameter 9 in.

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug
☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry
☐ Irrigation ☐ Air conditioning ☐ Commercial
☐ Test well ☐ Styrene

7 Casing: Material [redacted] Height: above/below
Threaded ☐ Welded ☒ Surface 12 in.
Diam. Weight 1.5 lbs./ft.
5 in. to 33 ft. depth Drive shoe? ☐ Yes ☒ No
in. to ft. depth

8 Screen: Styrene 200
Manufacturer Jess & Lowell
Type [redacted] Dia. 5"
Slot/gauze 1/8 Length 12'
Set between 33 ft. and 45 ft.
Fittings: 3/8-200
Gravel pack ☒ Yes ☐ No Size range of material

9 Static water level:
12½ ft. below land surface Date 6-18-75

10 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.

11 Water sample submitted:
☐ Yes ☒ No Date

12 Well head completion:
☐ Pitless adapter 12 ☐ Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
NONE KNOWN
ft. Direction Type
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name
Model number HP Volts
Length of drop pipe ft. capacity g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Certrifugal ☐ Other

2 Type and color of material	From	To
Top soil	0	3
Brown & gray clay	3	11
Sand & gravel	11	45

(use a second sheet if needed)

16 Remarks: elevation

1464

Topography:
☐ Hill
☐ Slope
☐ Upland
☐ Valley

17 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 & Eq., Inc. 185
Business name License No.
Address Great Bend, KS
Signed [signature] Date 6-18-75
Authorized representative

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

677-H