

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

WATER WELL RECORD
KSA 82a-1201-1215

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

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

1 Location of well:	County Barton	Township name Buffalo	Fraction SE $\frac{1}{4}$ SE $\frac{1}{4}$	Section number 30	Town number T19S	Range number R14W
Distance and direction from nearest town or city: Street address of well location if in city: 5 mi. West of Great Bend, Kansas				3 Owner of well: Address: Elden Holsapple Great Bend, Kansas		
Locate with "X" in section below: N W E S 1 Mile				Sketch map: 4 Well depth: 50 ft. Date of completion 4-29-75 Well diameter 9 in.		
2 Type and color of material				5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
Top soil				6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐		
Brown & gray clay				7 Casing: Material Styrene Height: above below Threaded ☐ Welded ☒ Surface 12 in. Diam. Weight 1.5 lbs./ft. 5 in. to 35 ft. depth Drive shoe? ☐ Yes ☒ No in. to ft. depth		
Sand & gravel				8 Screen: Manufacturer Jess & Lowell Type Styrene 200 Dia. 5" Slot gauge 1/8 Length 15' Set between 35 ft. and 50 ft. Fittings: 3/8-200 Gravel pack ☒ Yes ☐ No Size range of material		
Brown clay				9 Static water level: 25 ft. below land surface Date 4-29-75		
				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 10 inches above grade		
				13 Well grouted? ☒ Yes ☐ No ☒ Neat cement ☐ Bentonite ☐ Depth: From 0 ft. to 10 ft.		
				14 Nearest source of possible contamination: 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 ☐ Centrifugal ☐ Other		
(use a second sheet if needed)						
16 Remarks: elevation 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 Date 4-30-75 Authorized representative		

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

Form WWC-5