

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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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 Pawnee	Fraction NE 1/4 NE 1/4 NE 1/4	Section number 26	Township number T 21 S	Range number R 20 E/W																
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: Herb Drake R.R. or street: 1621 State City, state, zip code: Larned, Ka.																		
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile W <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td>X</td><td></td></tr><tr><td>NW</td><td></td><td></td><td>NE</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td>SW</td><td></td><td></td><td>SE</td></tr></table> E S 1 Mile</div>					X		NW			NE					SW			SE	Sketch map: <div style="text-align: right;">6. Bore hole dia. <u>10</u> in. Completion date <u>10/22/75</u> Well depth <u>68</u> ft.</div> <div>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</div> <div>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</div> <div>9. Casing: Material <u>PVC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>160</u> lbs./ft. Dia. <u>5 1/2</u> in. to <u>48</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <input type="checkbox"/></div>		
		X																			
NW			NE																		
SW			SE																		
5. Type and color of material			From	To	10. Screen: Manufacturer's name <u>R & B</u>																
Top soil			0	3	Type <u>pvc</u> Dia. <u>5 1/2</u>																
Hard brown clay			3	17	Slot/gauze <u>1/16</u> Length <u>20</u>																
Clay			17	35	Set between <u>48</u> ft. and <u>68</u> ft.																
Sand & gravel good			35	47	Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4-3/8</u> - <u>1/2</u>																
Clay			47	47 1/2	11. Static water level: <u>40</u> ft. below land surface Date <u>10/22/75</u> mo./day/yr.																
Gravel good			47 1/2	68	12. Pumping level below land surfaces: <u>45</u> ft. after <u>1</u> hrs. pumping <u>30</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>200</u> g.p.m.																
Clay			68		13. Water sample submitted: <u> </u> mo./day/yr. <u> </u> Yes <input checked="" type="checkbox"/> No <u> </u> Date <u> </u>																
					14. Well head completion: <u> </u> Pitless adapter <u>12</u> inches above grade																
					15. Well grouted? <u> </u> With: <input checked="" type="checkbox"/> Neat cement <u> </u> Bentonite <u> </u> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.																
					16. Nearest source of possible contamination: ft. <u>10</u> Direction <u>north</u> Type <u>cattle pin</u> Well disinfected upon completion? <u> </u> Yes <input checked="" type="checkbox"/> No																
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> g.p.m. Type: <u> </u> Submersible <u> </u> Turbine <u> </u> Jet <u> </u> Reciprocating <u> </u> Centrifugal <u> </u> Other																
(Use a second sheet if needed)					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. <u>Rosencrantz-Bemis 134</u> Business name <u> </u> License No. <u> </u> Address <u>Great Bend, Ka.</u> Signed <u>Freddie Anderson</u> Date <u>10/29/75</u> Authorized representative																
18. Elevation:	19. Remarks:																				
Topography: <u> </u> Hill <u> </u> Slope <input checked="" type="checkbox"/> Upland <u> </u> Valley																					

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

Form WWC-5