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WATER WELL RECORD
KSA 820-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County Pawnee	Fraction sw 1/4 ne 1/4 se 1/4	Section number 20	Township number T 22 S R 16 E W	Range number
2. Distance and direction from nearest town or city: 5-S of Larned, Ks. Street address of well location if in city:			3. Owner of well: Pawnee Beef Builders R.R. or street: RR. 2 City, state, zip code: Larned, Kansas 67550		
4. Locate with "X" in section below: <div style="text-align: center; margin-top: 10px;"> </div>			Sketch map:		
5. Type and color of material			6. Bore hole dia. <u>10</u> in. Completion date <u>4-11-79</u> Well depth <u>60</u> ft.		
			7. 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: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry/ Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material <u>pvc</u> Height: Above or below <u>max</u> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>18</u> in. RMP <u>5 1/2</u> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5 1/2</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. <u>258</u>		
			10. Screen: Manufacturer's name <u>CertainTeed</u> Type <u>pvc</u> Dia. _____ Slot <u>xxx 1/16</u> Length <u>20</u> Set between <u>40</u> ft. and <u>60</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>#3/4 3/8</u>		
			11. Static water level: _____ mo./day/yr. <u>27</u> ft. below land surface Date <u>4-11-79</u>		
			12. Pumping level below land surfaces: <u>27</u> ft. after <u>1</u> hrs. pumping <u>60</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>200</u> g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>4-11-79</u>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
			16. Nearest source of possible contamination: ft. <u>75</u> Direction <u>SE</u> Type <u>cattle p</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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		
(Use a second sheet if needed)					
18. Elevation:	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. <u>Rosencrantz-Bemis</u> <u>134</u> Business name License No. Address <u>Great Bend, Kansas 67530</u> Signed <u>Sandy K. Moore</u> Date <u>4-27-</u> Authorized representative		

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

Form WWC-5

MI-1023