

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

<input checked="" type="checkbox"/> Location of well:	County: <b>PRATT</b>	Section: <b>NE 1/4 SW 1/4 SE 1/4</b>	Section number: <b>13</b>	Township number: <b>T 26 S</b>	Range number: <b>R 12 W E/W</b>
2. Distance and direction from nearest town or city: <b>1 mile NORTH 1 mile west 1/2 NORTH</b>			3. Owner of well: <b>EABLE DRIG CO</b> R.R. or street: <b>BOX 11</b> City, state, zip code: <b>Great Bend 67530</b>		
<input checked="" type="checkbox"/> Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>9</b> in. Completion date <b>10-26-78</b> Well depth <b>107</b> ft.	
		7. <input checked="" 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		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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other	
				9. Casing: Material <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>278-3</b> lbs./ft. Dia. <b>5</b> in. <b>107</b> ft. depth Wall Thickness: inches <b>1/2</b> Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. <b>200 #36</b>	
5. Type and color of material			From	To	10. Screen: Manufacturer's name <b>Peerless</b>
Sandy Clay			0	45	Type <b>Saw</b> Dia. <b>5</b>
Clay			45	60	Slot/gauze <b>1/8</b> Length <b>20</b>
Fine Sand			60	90	Set between <b>107</b> ft. and <b>87</b> ft.
Gravel			90	107	Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <b>1/4-1/8</b>
					11. Static water level: <b>42</b> ft. below land surface Date <b>10-26-78</b> mo./day/yr.
					12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.
					13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____ mo./day/yr.
					14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade
					15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.
					<input checked="" type="checkbox"/> Nearest source of possible contamination: ft. _____ Direction _____ Type <b>none</b> Well disinfected upon completion? <input 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. <b>Myers Water Well 143</b> Business name <b>Great Bend KS</b> License No. _____ Address <b>Great Bend KS</b> Signed <b>Floyd Rosendahl</b> Date <b>10-26</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 26 S  
 R 12 W  
 Sec 13  
 NE SW SE  
 1/4 1/4 1/4

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

Form WWC-5