

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

1. Location of well:	County Pratt	Fraction 1/4 1/4 GNE 1/4	Section number 33	Township number T 26 S	Range number R 12
2. Distance and direction from nearest town or city: 4 1/2 miles SW of Preston Street address of well location if in city:			3. Owner of well: Bill Cooper R.R. or street: Route 1 City, state, zip code: Preston, KS 67569		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 24 in. Completion date 6-14-76 Well depth 146 ft.	
		7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
				9. Casing: Material steel Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 30.3 lbs./ft. Dia. 16 in. to 100 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 7 ga.	
5. Type and color of material			From	To	10. Screen: Manufacturer's name Doerr
top soil & brown clay			0	5	Type Double-slot Dia. 16" <input checked="" type="checkbox"/> Slot gauge 1/8" Length 46" Set between 100 ft. and 146 ft. ft. and <input type="checkbox"/> ft. Gravel pack? yes Size range of material 3/8-200
brown & gray clay			5	35	11. Static water level: <input type="checkbox"/> mo./day/yr. 57' 6" ft. below land surface Date 6-7-76
brown clay & limestone			35	66	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.
sand & sandy clay			66	73	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
gray & brown clay & limestone			73	97	14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 12 inches above grade
sand & gravel & clay streaks at 115 & 125			97	145	15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.
					16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> NONE KNOWN Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
					17. Pump: <input type="checkbox"/> Not installed Manufacturer's name FMC - Peerles Corp. Model number 12MB-4 HP 60 Volts 460 Length of drop pipe 100 ft. capacity 900 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
					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. Clarke Well & Eq. Inc. 185 Business name License No. Address Great Bend, KS 67530 Signed <i>[Signature]</i> Date 6-22-76 Authorized representative
18. Elevation:	19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

26 120 33
 Sec 1/4 1/4 9/4
 CME

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

Form WWC-5