WATER WELL RECORD KSA 82a-1201-1215

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

	County	Fraction			Section number		Township number Range number			
1. Location of well:	Pratt	E/2+4	NW 1/4 SW	1/4	4		T 26 S	R 13		
2. Distance and direction from nearest town or city: 6½ miles Northwest of Iuka, KS				3. Owner of well: Steve Snyder R.R. or street: Route 1 City, state, zip code: Iuka, KS 67066						
4. Locate with "X" in section below: Sketch map:					idie, zip c	J.	6. Bore hole dia. $\frac{5}{50}$ in. Completion date $\frac{1-6-78}{50}$ Well depth $\frac{50}{50}$ ft.			
						•	7Cable toolRotaryDrivenDugHollow rodJettedBoredX Reverse rotary 8. Use:DomesticPublic supplyIndustryIrrigationAir conditioning XX StockLawnOil field waterOther			
S 1 Mile1							9. Casing: Material Plast Height: bove or below Threaded Welded _X Surface 12 _ in. RMP PVC Weight 63 _ lbs./ft. Dia.2\frac{1}{2} in. to _40 ft. depth Wall Thickness: inches or			
5. Type and color of	material				From	To	Diain. to ft. dept 10. Screen: Manufacturer's n		s_	
Top soil & sand					0	7	Type PVC	_ Dia. $\frac{2\frac{1}{2}!!}{}$		
Brown & gray clay					7	23	Slot gauze			
Sand & sandy clay					23	37	Gravel pack? <u>VES</u> Size ra	nge of material 3/8-		
Sand & gravel					37	50	11. Static water level: 14 1611 ft. below land sur		78	
							12. Pumping level below land the ft. after sample submitted:	nrs. pumping g nrs. pumping g	.p.m.	
		т в					14. Well head completion:	Date	ade	
							15. Well grouted? <u>VES</u> With: <u>X</u> Neat cement Depth: From <u>O</u> ft. to	Bentonite Coi		
							16. Nearest source of possible ft Direction Well disinfected upon comple	tion? X Yes		
								X Not installed HP Volts		
							Length of drop pipe ft. capacityg.p.m. Type: Submersible Turbine			
	(Use a second s	heet if neede	d)				Jet Centrifugal	Reciproca	ting S	
18. Elevation: Topography: Hill Slope Upland Valley	19. Remarks:						20. Water well contractor's of This well was drilled under my is true to the best of my know Clarke Well & E Business name Address Great Bend Authorized rep.	y jurisdiction and this re ledge and belief. quip. Inc. Licens 67530	port 185 ≥ 1	

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

Form WWC-5