

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 SE 1/4 SE 1/4 SW 1/4	Section number 31	Township number T 26 S R 13 E 0	Range number				
2. Distance and direction from nearest town or city: 2 W Iuka			3. Owner of well: Larry Honeman						
Street address of well location if in city:			R.R. or street: RFD 3						
			City, state, zip code: Pratt Kansas 67124						
4. Locate with "X" in section below:		Sketch map:							
N									
<table border="1" style="width:100%; height:100px;"> <tr> <td style="width:50px;">NW</td> <td style="width:50px;">NE</td> </tr> <tr> <td style="width:50px;">SW</td> <td style="width:50px;">SE</td> </tr> </table>		NW	NE	SW	SE				
NW	NE								
SW	SE								
S									
1 Mile									
5. Type and color of material		From	To	6. Bore hole dia. 9 in. Completion date 4-28-71 Well depth 92 ft.					
Earth		0	3	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					
Brown clay		3	33	8. Use: <input checked="" 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					
Hard brown clay		33	45	9. Casing: Material _____ Height <u>Above</u> or below Threaded _____ Welded _____ Surface 22 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 82 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. 258					
Brown sandy clay		45	55	10. Screen: Manufacturer's name Pumpco					
Fine sand		55	65	Type PVC Dia. 3" Slot/gauze 1/16" Length 10' Set between 82 ft. and 92 ft. _____ ft. and _____ ft. Gravel pack? Yes Size range of material 4/16-3/8					
Tan sandy clay		65	75	11. Static water level: _____ mo./day/yr. 34 ft. below land surface Date 4-28-71					
Fine sand		75	80	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 125 g.p.m.					
Coarse sand		80	92	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____					
				14. Well head completion: <input type="checkbox"/> Pitless adapter 22 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 0 ft. to 10 ft.					
				16. Nearest source of possible contamination: ft. 30 Direction East Type Pond Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
				17. Pump: _____ Not installed Manufacturer's name Dempster 3" Model number Cyander HP _____ Volts _____ Length of drop pipe 63 ft. capacity 10 g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input checked="" 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. Hank Bruse Well Ser. 103 Business name _____ License No. _____ Address 1117 Stout Signed Hank Bruse Date 6-1-71 Authorized representative						
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley									

T 26 S R 13 E 0

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

Form WWC-5