

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 <u>Pratt</u>		Fraction <u>SE 1/4 SW 1/4 SW 1/4</u>		Section number <u>33</u>		Township number <u>T 26 S</u>		Range number <u>R 13 W E/W</u>			
2. Distance and direction from nearest town or city:				3. Owner of well: <u>H-30 INC</u>							
Street address of well location if in city: <u>IUKA</u>				R.R. or street:							
				City, state, zip code: <u>Wichita, Ks</u>							
4. Locate with "X" in section below:				Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date _____					
						Well depth <u>120</u> ft. <u>6 Apr 78</u>					
				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							
				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							
				5. Type and color of material		From		To		9. Casing: Material _____ Height <u>Above</u> or below	
				Soil		0		2		Threaded _____ Welded _____ Surface <u>12</u> in.	
				Clay, brown		2		6		RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft.	
				Clay, tan with caliche streaks		6		32		Dia. <u>5</u> in. to <u>100</u> ft. depth Wall Thickness: inches or	
				Sand, fine to coarse		32		56		Dia. _____ in. to _____ ft. depth Gage No. <u>258</u>	
				Sand, fine to coarse and med. gravel		56		78		10. Screen: Manufacturer's name _____	
				Clay, sandy tan		78		92		Type <u>Saw Slot</u> Dia. <u>5"</u>	
				Sand, fine to coarse and med. gravel		92		119		Slot/gauze <u>1/8</u> Length <u>20'</u>	
				Clay, tan		119		123		Set between <u>100</u> ft. and <u>120</u> ft.	
				Sand, fine to coarse and med. gravel		123		135		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 X 1/4</u>	
										11. Static water level: _____ mo./day/yr.	
										<u>57</u> ft. below land surface Date <u>6 Apr 78</u>	
										12. Pumping level below land surfaces:	
										_____ ft. after _____ hrs. pumping _____ g.p.m.	
										_____ ft. after _____ hrs. pumping _____ g.p.m.	
										Estimated maximum yield <u>50</u> g.p.m.	
										13. Water sample submitted: _____ mo./day/yr.	
										Yes <input checked="" type="checkbox"/> No _____ Date _____	
										14. Well head completion:	
										_____ Pitless adapter <u>12</u> Inches above grade	
										15. Well grouted? <input checked="" type="checkbox"/>	
										With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete	
										Depth: From <u>0</u> ft. to <u>10</u> ft.	
										16. Nearest source of possible contamination:	
										ft. _____ Direction _____ Type <u>Wells</u>	
										Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ 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 _____ Turbine	
										<input type="checkbox"/> Jet _____ Reciprocating	
										<input type="checkbox"/> Centrifugal _____ Other	
										(Use a second sheet if needed)	
18. Elevation:		19. Remarks:				20. Water well contractor's certification:					
Topography:						This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.					
<input type="checkbox"/> Hill						<u>Central Well & Pump Svc.</u> <u>325</u>					
<input type="checkbox"/> Slope						Business name _____ License No. _____					
<input checked="" type="checkbox"/> Upland						Address <u>121 S. Taylor Pratt, Ks.</u>					
<input type="checkbox"/> Valley						Signed <u>[Signature]</u> Date _____					
						Authorized representative <u>[Signature]</u>					

T 26 S R 13 W Sec 33 SW 1/4 SW 1/4

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

Form WWC-5