

USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Pratt	Township name Iuka	Fraction SESESW	Section number 36	Town number 26	Range number 13
Distance and direction from nearest town or city: 2 1/2 E US281 from Cemetery Rd			3 Owner of well: Jim Pecinovsky Iuka, Kansas 67066			
Street address of well location if in city:			Address:			
Locate with "X" in section below:			Sketch map:			4 Well depth: 105 ft. Date of completion: 9-6-76 Well diameter 10 in.
			5 <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			6 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 type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> _____
			7 Casing: Material pvc Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 76 in. Diam. glue Weight 170 lbs./ft. 5 in. to 95 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth			
2 Type and color of material			From	To	8 Screen: Manufacturer Jess & Lowell Type rmp Dia. 5" Slot/gauze 1/16 Length 10' Set between 95 ft. and 105 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/16-3/8	
earth			0	2	9 Static water level: 40 ft. below land surface Date 9-6-76	
white gyp clay			2	37	10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 75 g.p.m.	
white clay			37	77	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
brown sandy clay			77	94	12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	
coarse sand			94	105	13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 6 ft. to 16 ft.	
(use a second sheet if needed)					14 Nearest source of possible contamination: ft. 150 Direction West Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
16 Remarks: elevation flat			15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Starite Model number 1P882 HP 1 Volts 230 Length of drop pipe _____ ft. capacity 30 g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			17 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 Bruce Well Serv 103 Business name License No. Address 1117 Stout Pratt, Ks Signed Joyce Bruce Date 1-1-77 Authorized representative			

26 13 W 36 SE SE SW

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5