

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 C NW 1/4 1/4 1/4 1/4		Section number 2	Township number T 26 S R 15 W E/W	Range number
2. Distance and direction from nearest town or city: 1 NO. - 3 WEST - 3/4 NO. OF BYERS, KANS.				3. Owner of well: Arden Reiman R.R. or street: City, state, zip code: BYERS, KANS. 67021		
4. Locate with "X" in section below: Sketch map: N W E S 1 Mile Center of Quarter				6. Bore hole dia. 2 1/2 in. Completion date 10 DEC Well depth 125 ft.		
5. Type and color of material				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 checked="" 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		
From To				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 <input type="checkbox"/> lbs./ft. Dia. 1 1/2 in. to 125 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 7 Ga.		
				10. Screen: Manufacturer's name W. A. BROWN ENTERPRISE Type ST. FREE FLOW Dia. 1 1/2 " Slot/gauze 1/4 Length 40 ' Set between 85 ft. and 125 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8 - 3/16		
TOP				11. Static water level: <input type="checkbox"/> mo./day/yr. 18 ft. below land surface Date 12/10/76		
COURSE SAND - FINE GRAVEL				12. Pumping level below land surfaces: <input type="checkbox"/> ft. after NA 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 1500 g.p.m.		
Clay				13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date		
COURSE SAND - COURSE GRAVEL				14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade		
Clay				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 11 ft.		
COURSE SAND				16. Nearest source of possible contamination: ft. 2100 Direction SOUTHWEST FARM ROAD Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Clay				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name WESTERN LAND ROLLER Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts Length of drop pipe 80 ft. capacity 800 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		
COURSE SAND - COURSE GRAVEL				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. Wells Drilling Co. 112 Business name License No. Address 1030 Highway 54 EAST Signed Sal Wells Date Jan 1/77 Authorized representative		
Clay - BOTTOM						
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

T 26
 R 15
 W E/W
 Sec 2
 C NW

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

Kingman, Kans. Form WWC-5