

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<br><b>Pratt</b> | Fraction<br><b>1/4 csw/4 SW 1/4</b> | Section number<br><b>18</b>  | Township number<br><b>T 26 S R 15W</b> | Range number<br><b>E/W</b> |
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city:   |                        |                                     | 3. Owner of well:<br>R.R. or street:<br>City, state, zip code:   |  |                            |
| <b>1w 13/4s<br/>Hopewell, Ks.</b>   |                        |                                     | <b>Union Drlg Co Inc<br/>505 Union Ctr<br/>Wichita, Ks. 67202</b>  |  |                            |
| 4. Locate with "X" in section below:<br>N<br>W<br>E<br>S<br>1 Mile  |                        |                                     | Sketch map:<br>6. Bare hole dia. <del>8 3/4</del> in. Completion date _____<br>Well depth <b>77</b> ft. <b>4-10-78</b>   |  |                            |
|   |                        |                                     | 7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><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<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other   |  |                            |
| 5. Type and color of material   |                        |                                     | 9. Casing: Material _____ Height: Above ground _____<br>Threaded _____ Welded _____ Surface <b>12</b> in.<br>RMP _____ PVC <input checked="" type="checkbox"/> Weight <b>2.8</b> lbs./ft.<br>Dia. <b>5</b> in. to <b>77</b> ft. depth Wall Thickness: inches or<br>Dia. _____ in. to _____ ft. depth gage No. <b>sch 40</b>  |  |                            |
|   |                        |                                     | 10. Screen: Manufacturer's name _____<br><b>Jetstream</b><br>Type <b>pvc</b> Dia. <b>5"</b><br>Slot/gauze <b>1/32"</b> Length <b>20'</b><br>Set between <b>57</b> ft. and <b>77</b> ft.<br>_____ ft. and _____ ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8-3/4"</b>  |  |                            |
|   |                        |                                     | 11. Static water level: _____ mo./day/yr.<br><b>19</b> ft. below land surface Date <b>4--10-78</b>   |  |                            |
|   |                        |                                     | 12. Pumping level below land surfaces:<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield <b>60</b> g.p.m.   |  |                            |
|   |                        |                                     | 13. Water sample submitted: _____ mo./day/yr.<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____  |  |                            |
|   |                        |                                     | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter <b>12</b> inches above grade   |  |                            |
|   |                        |                                     | 15. Well grouted? <input checked="" type="checkbox"/><br>With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <b>0</b> ft. to <b>10</b> ft.   |  |                            |
|   |                        |                                     | 16. Nearest source of possible contamination: <b>oil test</b><br>ft. <b>70</b> Direction <b>se</b> Type <b>test</b><br>Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>   |  |                            |
|   |                        |                                     | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name _____<br>Model number _____ HP _____ Volts _____<br>Length of drop pipe _____ ft. capacity _____ g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |  |                            |
|   |                        |                                     | (Use a second sheet if needed)   |  |                            |
| 18. Elevation:<br><br>Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input checked="" type="checkbox"/> Upland<br><input type="checkbox"/> Valley | 19. Remarks:           |                                     | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><b>Kellys Waterwell Ser 186</b><br>Business name License No. _____<br>Address <b>R2 Great Bend, Ks.</b><br>Signed <b>Kelly Price</b> Date <b>9-19-79</b><br>Authorized representative   |  |                            |

T 26 S R 15W Sec 18 cswsw

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

Form WWC-5