

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 <b>Pratt</b>	Fraction <b>1/4 1/4 1/4</b> 1/4 1/4 1/4	Section number <b>19</b>	Township number <b>26</b> T 26 S R	Range number <b>15 16</b> 15 16 E/W
2. Distance and direction from nearest town or city: <b>2 1/2 S of Hopewell</b> Street address of well location if in city:				3. Owner of well: <b>Ralph Bisel</b> R.R. or street: City, state, zip code: <b>Mackville, Ks.</b>		
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. <b>2 1/2</b> in. Completion date Well depth <b>148</b> ft. <b>2-10-76</b>		
				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 type="checkbox"/> Reverse rotary		
				8. Use: <input 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		
5. Type and color of material				9. Casing: Material <b>steel</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <b>16</b> in. to <b>148</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
				10. Screen: Manufacturer's name <b>Doerrs</b> Type <b>steel</b> Dia. <b>16</b> Slot/gauge <b>3/16</b> Length <b>60</b> Set between <b>38</b> ft. and <b>148</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/2 3/4 3/8</b>		
				11. Static water level: _____ mo./day/yr. <b>12</b> ft. below land surface Date <b>10-27-76</b>		
				12. Pumping level below land surfaces: <b>11</b> ft. after <b>16</b> hrs. pumping <b>1000</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>1200</b> g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
				16. Nearest source of possible contamination: ft. <b>314</b> Direction <b>N</b> Type <b>Feed lot</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name <b>WLR</b> Model number <b>5CM12</b> HP <b>80</b> Volts _____ Length of drop pipe <b>75</b> ft. capacity <b>1000</b> 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		
(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. <b>Rosenkrantz - Bemis 194</b> Business name _____ License No. _____ Address <b>Great Bend, Ks.</b> Signed <b>Fredia Madson</b> Date <b>2/29/76</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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 CSE

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

Form WWC-5