

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>1/4cnw 1/4 nw 1/4</b>	Section number <b>21-</b>	Township number <b>T 26</b>	Range number <b>S R 15W E/W</b>
2. Distance and direction from nearest town or city: <b>2s 1 1/4e</b>			3. Owner of well: <b>Gabbert-Jones, Inc.</b>		
Street address of well location if in city: <b>Hopewell, Ks.</b>			R.R. or street: <b>830 Sutton Pl.</b>		
			City, state, zip code: <b>Wichita, Ks. 67202</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date <u>4-27-78</u> Well depth <u>77</u> ft.	
				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	
5. Type and color of material		From	To	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	
				9. Casing: Material <input type="checkbox"/> Height: Above <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>2.8</u> lbs./ft. Dia. <u>5</u> in. to <u>77</u> ft. depth, Wall Thickness: inches or Dia. <u>   </u> in. to <u>   </u> ft. depth, gage No. <u>sch 40</u>	
Top Soil-Clay		0	25	10. Screen: Manufacturer's name <u>Jetstream</u> Type <u>pvc</u> Dia. <u>5"</u> Slot/gauze <u>1/32"</u> Length <u>20'</u> Set between <u>57</u> ft. and <u>77</u> ft. <u>   </u> ft. and <u>   </u> ft.	
Sandy Clay		25	45	Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-3/4"</u>	
Sand		45	55	11. Static water level: <u>23</u> ft. below land surface Date <u>4-27-78</u> mo./day/yr.	
Sand-Gravel		55	77	12. Pumping level below land surfaces: <u>   </u> ft. after <u>   </u> hrs. pumping <u>   </u> g.p.m. <u>   </u> ft. after <u>   </u> hrs. pumping <u>   </u> g.p.m. Estimated maximum yield <u>75</u> g.p.m.	
				13. Water sample submitted: <u>   </u> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <u>   </u>	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: <u>Oil</u> ft. <u>50</u> Direction <u>sw</u> Type <u>test</u> Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u>   </u> Model number <u>   </u> HP <u>   </u> Volts <u>   </u> Length of drop pipe <u>   </u> ft. capacity <u>   </u> g.p.m. Type: <input type="checkbox"/> Submersible <input 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>Kellys Waterwell Ser 186</b> Business name <u>Kellys Waterwell</u> License No. <u>   </u> Address <u>Rt 2 Great Bend, Ks.</u> Signed <u>Kelly Prial</u> Date <u>9-29-79</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

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

Form WWC-5