

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

*Lincoln Land #2*

1. Location of well: County <u>Pratt</u> Fraction <u>NW 1/4 SW 1/4 SE 1/4</u> Section number <u>26</u> Township number <u>T 26 S</u> Range number <u>S R 15 W</u>	
2. Distance and direction from nearest town or city: <u>3 west</u> <u>3 south</u> Street address of well location if in city: <u>Byers</u>	
3. Owner of well: <u>Sterling Drilling Co</u> R.R. or street: <u>Sterling Kansas</u> City, state, zip code:	
4. Locate with "X" in section below: Sketch map: <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">1 Mile</p> </div> </div>	
5. Type and color of material	
	From To
<u>Clay</u>	<u>0</u> <u>15</u>
<u>Sandy Clay</u>	<u>15</u> <u>40</u>
<u>Sand</u>	<u>40</u> <u>55</u>
<u>Gravel</u>	<u>55</u> <u>75</u>
(Use a second sheet if needed)	
18. Elevation:  Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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. <u>Myers water well</u> Business name: <u>Myers</u> License No. <u>143</u> Address: <u>11 Bend Ks</u> Signed: <u>A Myers</u> Date: <u>2-7-78</u> Authorized representative	

6. Bore hole dia. <u>8.5</u> in. Completion date <u>2-7-78</u> Well depth <u>75</u> ft.
7. <input checked="" 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
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 <u>Plastic</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>287.3</u> lbs./ft. Dia. <u>5</u> in. to <u>75</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. <u>200</u>
10. Screens: Manufacturer's name <u>Self made</u> Type <u>PVC</u> Dia. <u>5</u> Slot/gauze <u>5</u> Length <u>20</u> Set between <u>55</u> ft. and <u>75</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>5-1/2</u>
11. Static water level: <u>30</u> ft. below land surface Date <u>2-7-78</u> mo./day/yr.
12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> 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 <input type="checkbox"/> g.p.m.
13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr.
14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade
15. Well grouted? <u>yes</u> 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: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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

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