

USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

Kansas Department of Health and Environment—Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:		County Edwards	Fraction 1/4 1/4 CSE/4	Section number 19	Township number T 26 S R 18 E W	Range number
2. Distance and direction from nearest town or city: 13 1/2 mi. Southeast of Kinsley, KS Street address of well location if in city:				3. Owner of well: Elmer Huckstep R.R. or street: (?) City, state, zip code: Lewis, KS 67552		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 24 in. Completion date 12-23-75 Well depth 136 ft.		
		SEE PG. 2-		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 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		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 30.3 lbs./ft. Dia. 16 in. to <input type="checkbox"/> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gauge No. 7 ga.		
Sand & top soil		0	2	10. Screen: Manufacturer's name W. A. Brown Type Double-slot Dia. 16" 1/8 Slot gauge Length 46' Set between SEE PG 2 ft. and <input type="checkbox"/> ft. Gravel pack? Yes Size range of material 3/8-200		
Brown & gray clay		2	14	11. Static water level: <input type="checkbox"/> ma./day/yr. 29 ft. below land surface Date 12-12-75		
Sandy clay		14	17	12. Pumping level below land surfaces: N/C <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.		
Gravel		17	25	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
Sand, gravel & clay streaks at 42'-43'		25	46	14. Well head completion: <input type="checkbox"/> Pitless adapter 12" X 12" above grade		
Gray clay		46	48	15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
Sand & gravel		48	86	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 checked="" type="checkbox"/> No		
Brown clay & limestone		86	99	17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Berkeley Pump Co. Model number 1202M-4 HP 80 Volts <input type="checkbox"/> Length of drop pipe 70 ft. capacity 900 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		
Sand, gravel & limestone		99	114	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. Business name _____ License No. _____ Address _____ Signed On Pg. -2- Date _____ Authorized representative		
Brown clay & limestone		114	125			
Sand & gravel		125	135			
Brown clay		135	136			
(Use a second sheet if needed)						
18. Elevation:	19. Remarks:		SEE PG. -2- FOR CASING & SCREEN FOOTAGES.			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 26
 R 18
 W E
 19
 Sec 1/4 1/4 1/4 CSE

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

1. Location of well:	County	Fraction 1/4 1/4 1/4	Section number	Township number T S R	Range number EW
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: Elmer Huckstep R.R. or street: City, state, zip code:		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 6. Bore hole dia. _____ in. Completion date _____ Well depth _____ ft.		
			7. ___ Cable tool ___ Rotary ___ Driven ___ Dug ___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary		
			8. Use: ___ Domestic ___ Public supply ___ Industry ___ Irrigation ___ Air conditioning ___ Stock ___ Lawn ___ Oil field water ___ Other		
5. Type and color of material			9. Casing: Material _____ Height <u>Above</u> or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
<u>CASING & SCREEN FOOTAGES</u>			10. Screen: Manufacturer's name _____ Type _____ Dia. _____ <u>Slot</u> gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____		
			11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____		
Casing			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
Screen			13. Water sample submitted: _____ mo./day/yr. Yes _____ No _____ Date _____		
Casing			14. Well head completion: ___ Pitless adapter _____ Inches above grade		
Screen			15. Well grouted? _____ With: ___ Neat cement ___ Bentonite ___ Concrete Depth: From _____ ft. to _____ ft.		
(Use a second sheet if needed)			16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes _____ No _____		
18. Elevation:			17. Pump: _____ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: ___ Submersible _____ Turbine ___ Jet _____ Reciprocating ___ Centrifugal _____ Other		
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. Clarke Well & Eq., Inc. 185 Business name License No. Address Great Bend, KS Signed [Signature] Date 1-15- Authorized representative		

T 26
 R 28
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 Sec 1/4 1/4 1/4
 1-15-1965