

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

Roberts #1

1. Location of well: County <u>PRATT</u>		Fraction <u>C 1/4 SW 1/4 NW 1/4</u>	Section number <u>22</u>	Township number <u>T 27 S R 12 E 0</u>	Range number
2. Distance and direction from nearest town or city: <u>2 1/2 miles 5 East</u>			3. Owner of well: <u>DR. Grant Oil Co.</u> R.R. or street: City, state, zip code: <u>Wichita Kansas</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>9</u> in. Completion date <u>3-9-78</u> Well depth <u>60</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"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <input type="checkbox"/> RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>387.3</u> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>60</u> ft. depth gage No. <u>200*</u>	
				10. Screen: Manufacturer's name <u>Shop 2 pipe</u> Type <u>slot</u> Dia. <u>5</u> Slot/gauze <u>4/40</u> Length <u>20</u> Set between <u>40</u> ft. and <u>60</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>4-1/4</u>	
				11. Static water level: <u>30</u> ft. below land surface Date <u>3-9-78</u> mo./day/yr.	
				12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>80</u> g.p.m.	
				13. Water sample submitted: ____ Yes <input checked="" type="checkbox"/> No Date ____ mo./day/yr.	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> <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 ____ ft. to ____ ft.	
				16. Nearest source of possible contamination: ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ 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. <u>Myself</u> Business name <u>Grant Oil Co.</u> License No. <u>1413</u> Address <u>Grant Blvd</u> Signed <u>Charles S. Myers</u> Date <u>3-30-78</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 27 R 12 E 0 S 22 Sec 22 C 514 NW 1/4 1/4 1/4

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

Form WWC-5