

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-Barber #2*

|   |  |                                      |  |  |  |  |  |  |  |
|---|--|--------------------------------------|--|--|--|--|--|--|--|
| 1. Location of well: County <u>Pratt</u>  |  | Fraction <u>NE 1/4 SW 1/4 SW 1/4</u> |  | Section number <u>22</u>   |  | Township number <u>T 27 S R 12 E</u>   |  | Range number   |  |
| 2. Distance and direction from nearest town or city: <u>5 miles east Topeka</u>   |  |                                      |  | 3. Owner of well: <u>DR Faust Oil Co</u>   |  |  |  |  |  |
| Street address of well location if in city:   |  |                                      |  | R.R. or street: <u>Wichita Farms</u>   |  |  |  |  |  |
| City, state, zip code: <u>Wichita, Kansas</u>   |  |                                      |  |  |  |  |  |  |  |
| 4. Locate with "X" in section below:  |  |                                      |  | Sketch map:  |  | 6. Bore hole dia. <u>5</u> in. Completion date <u>3-17-78</u><br>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<br><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<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><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 <u>12</u> in.<br>RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>287.3</u> lbs./ft.<br>Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or<br>Dia. <u>5</u> in. to <u>60</u> ft. depth gage No. <u>200</u> |  |  |  |
| 5. Type and color of material   |  |                                      |  | From   |  | To   |  | 10. Screens: Manufacturer's name <u>Shuf-Made</u>  |  |
| <u>Sand</u>   |  |                                      |  | <u>0</u>   |  | <u>4</u>   |  | Type <u>Saw</u> Dia. <u>5</u>  |  |
| <u>Clay</u>   |  |                                      |  | <u>4</u>   |  | <u>30</u>  |  | Slot/gauze <u>1/8</u> Length <u>20</u>   |  |
| <u>Hard sand</u>  |  |                                      |  | <u>30</u>  |  | <u>40</u>  |  | Set between <u>18</u> ft. and <u>60</u> ft.  |  |
| <u>Gravel</u>   |  |                                      |  | <u>40</u>  |  | <u>60</u>  |  | Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>4/8</u>   |  |
|   |  |                                      |  |  |  |  |  | 11. Static water level: <u>18</u> ft. below land surface Date <u>3-17-78</u>   |  |
|   |  |                                      |  |  |  |  |  | 12. Pumping level below land surfaces:<br>____ ft. after ____ hrs. pumping ____ g.p.m.<br>____ ft. after ____ hrs. pumping ____ g.p.m.<br>Estimated maximum yield <u>150</u> g.p.m.  |  |
|   |  |                                      |  |  |  |  |  | 13. Water sample submitted: ____ mo./day/yr.<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____  |  |
|   |  |                                      |  |  |  |  |  | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter <u>12</u> inches above grade   |  |
|   |  |                                      |  |  |  |  |  | 15. Well grouted? <input checked="" type="checkbox"/><br>With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From ____ ft. to ____ ft.  |  |
|   |  |                                      |  |  |  |  |  | 16. Nearest source of possible contamination:<br>ft. ____ Direction ____ Type ____<br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |  |
|   |  |                                      |  |  |  |  |  | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name ____<br>Model number ____ HP ____ Volts ____<br>Length of drop pipe ____ ft. capacity ____ g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |  |
|   |  |                                      |  |  |  |  |  | (Use a second sheet if needed)   |  |
| 18. Elevation:  |  | 19. Remarks:                         |  | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><u>Myers Water Well Service</u><br>Business name <u>Myers Water Well Service</u> License No. <u>142</u><br>Address <u>142</u><br>Signed <u>Robert Barber</u> Date <u>3-17-78</u><br>Authorized representative |  |  |  |  |  |
| Topography:<br><input type="checkbox"/> Hill<br><input checked="" type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  |                                      |  |  |  |  |  |  |  |

T 27 S R 12 E Sec 22 NE SW SW

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Form WWC-578