

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 <u>Pratt</u>		Fraction <u>SE 1/4 NE 1/4 NE 1/4</u>		Section number <u>19</u>		Township number T <u>27</u> S R		Range number <u>13</u> E <u>W</u>	
2. Distance and direction from nearest town or city: <u>1/2 W 3/4 N of Pratt</u>				3. Owner of well: <u>W. H. Lampe</u>		R.R. or street: <u>RFD 3</u>			
Street address of well location if in city:				City, state, zip code: <u>Pratt, Kansas 67124</u>					
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date <u>10-12-76</u>		Well depth <u>120</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				8. Use: <input checked="" 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other					
				9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below					
				Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>1/4</u> in.					
				RMP <input type="checkbox"/> PVC <u>Blue</u> Weight <u>160</u> lbs./ft.					
				Dia. <u>5</u> in. to <u>110</u> ft. depth Wall Thickness: inches of					
				Dia. <u>5</u> in. to <u>110</u> ft. depth gage No. <u>Sch 40</u>					
				10. Screen: Manufacturer's name <u>Jess & Lowell</u>					
				Type <u>RMP</u> Dia. <u>5"</u>					
				Slot/gauze <u>1/16</u> Length <u>10"</u>					
				Set between <u>110</u> ft. and <u>120</u> ft.					
				Gravel pack? <u>yes</u> Size range of material <u>1/16-3/8</u>					
				11. Static water level: <u>65</u> ft. below land surface Date <u>10-12-76</u>					
				12. Pumping level below land surfaces:					
				____ ft. after ____ hrs. pumping ____ g.p.m.					
				____ ft. after ____ hrs. pumping ____ g.p.m.					
				Estimated maximum yield <u>100</u> g.p.m.					
				13. Water sample submitted: <u>Yes</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____					
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ inches above grade					
				15. Well grouted? <u>yes</u>					
				With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete					
				Depth: From <u>4</u> ft. to <u>14</u> ft.					
				16. Nearest source of possible contamination: <u>100</u> ft. Direction <u>SW</u> Type <u>Septic</u>					
				Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
				17. Pump: Not installed					
				Manufacturer's name <u>STARITE</u>					
				Model number <u>LP8F2</u> HP <u>1</u> Volts <u>220</u>					
				Length of drop pipe <u>80</u> ft. capacity <u>30</u> g.p.m.					
				Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine					
				<input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating					
				<input type="checkbox"/> Centrifugal <input type="checkbox"/> Other					
18. Elevation:		19. Remarks: <u>4' Pad below Pitless unit</u>		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.					
Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				Business name <u>Hank Bruse Well Serv 103</u> License No. _____					
				Address <u>117 STOUT</u>					
				Signed <u>Jay Bruse</u> Date <u>3-2-77</u>					
				Authorized representative					

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Form WWC-5