

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

Leant #1

1. Location of well:	County: <u>Pratt</u>	Fraction: <u>SE 1/4 NE 1/4 NW 1/4</u>	Section number: <u>20</u>	Township number: <u>T 27</u>	Range number: <u>S R 13 E 01</u>
2. Distance and direction from nearest town or city: <u>9 West South Side Tulsa - 3 South</u>		3. Owner of well: <u>B. N. Drilling Co</u>			
Street address of well location if in city:		R.R. or street: <u>Box 993</u>			
		City, state, zip code: <u>Arkansas City KS 67005</u>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>9 1/2</u> in. Completion date <u>4-16-99</u> Well depth <u>80</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 _____ Height: Above or below Threaded _____ Welded _____ Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>278.3</u> lbs./ft. Dia. <u>5</u> in. to <u>80</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>265</u>	
				10. Screen: Manufacturer's name <u>Jet Stream</u> Type <u>Sand</u> Dia. <u>5</u> Slot/gauze <u>1/8</u> Length <u>30</u> Set between <u>60</u> ft. and <u>80</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-1/4</u>	
				11. Static water level: _____ mo./day/yr. <u>47</u> ft. below land surface Date <u>4-16-99</u>	
				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.	
				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <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 <u>0</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: ft. _____ Direction <u>North</u> Well disinfected upon completion? <input 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.		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			<u>Pratt Water Well Service Inc</u> Business name License No. _____ Address <u>Great Bend 143</u> Signed <u>Charles [Signature]</u> Date <u>4-16-99</u> Authorized representative		

T 27
 R 13
 E 01
 Sec 20
 SE NE NW
 1/4 1/4 1/4

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

Form WWC-5