

LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Pratt	SE 1/4 SE 1/4 SE 1/4	31	T 27 S	R 13 EW

Distance and direction from nearest town or city? **2 mi W of Pratt**

Street address of well if located within city?

WATER WELL OWNER: **KGS/GWMD#5**

RR#, St. Address, Box # : _____

City, State, ZIP Code : _____

Board of Agriculture, Division of Water Resources
Application Number: _____

DEPTH OF COMPLETED WELL: **4.5** ft. Bore Hole Diameter: **9-7/8** in. to _____ ft., and _____ in. to _____ ft.

Well Water to be used as:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Observation well
		12 Other (Specify below)

Well's static water level: **4.6** ft. below land surface measured on **January 28** month **28** day **1983** year

Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield: Well water was _____ ft. after _____ hours pumping _____ gpm

TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: Glued	Clamped
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded	
		7 Fiberglass		Threaded	

Blank casing dia: **5** in. to **4.0** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface: **24** in., weight _____ lbs./ft. Wall thickness or gauge No. **SDR 21**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)

Screen or Perforation Openings Are:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

Screen-Perforation Dia: **5** in. to **4.5** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Screen-Perforated Intervals: From **40** ft. to **4.5** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

Gravel Pack Intervals: From **35** ft. to **4.5** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GROUT MATERIAL: **1 Neat cement** 2 Cement grout 3 Bentonite 4 Other

Grouted Intervals: From **0** ft. to **10** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well
2 Sewer lines	5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well
3 Lateral lines	6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)
			13 Watertight sewer lines	

Direction from well: _____ How many feet _____ ? Water Well Disinfected? Yes **No**

Was a chemical/bacteriological sample submitted to Department? Yes **No** If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes **No**

If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____

Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **(1)** constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **August** month **17** day **1982** year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____

This Water Well Record was completed on **23** month **March** day **83** year under the business name of _____ by (signature) **Patrich M Cobb**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		LITHOLOGIC LOG		TO		LITHOLOGIC LOG	
	SECTION	SECTION	SECTION	SECTION	SECTION	SECTION	SECTION	SECTION
			See log from Site #43(1)					

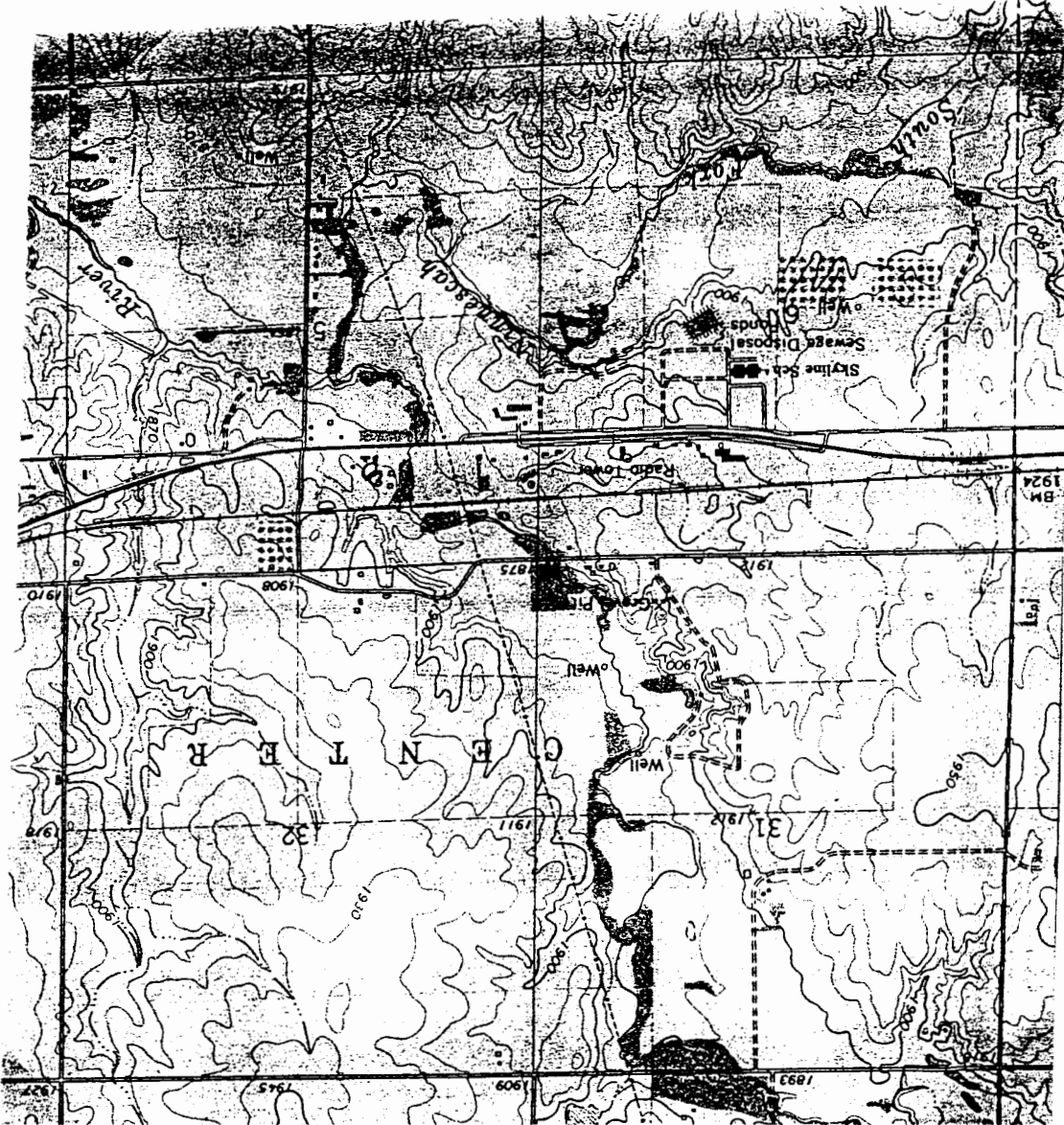
ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, please press firmly and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
T
27
R
13
EWD
SEC.
SE 1/4
SE 1/4
SE 1/4
SE 1/4

WELL LOCATION X



LANDOWNER: BOBBY GREENSTREET
 ADDRESS :
 PHONE NO. :

SITE NUMBER : 43
 SITE LOCATION : SE SE SE
 LEGAL LOCATION : 31-27-13M
 COUNTY : PRATT