

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <b>Pratt</b>	<b>ne</b> $\frac{1}{4}$ <b>ne</b> $\frac{1}{4}$ <b>ne</b> $\frac{1}{4}$	<b>33</b>	<b>T</b> <b>27</b> <b>S</b>	<b>R</b> <b>13W</b> <b>E/W</b>

Distance and direction from nearest town or city? \_\_\_\_\_ Street address of well if located within city?  
**1132 N. Main st. Pratt.**

2 WATER WELL OWNER: **Ed Bowe**  
 RR#, St. Address, Box #: **1132 N. Main St Pratt, Ks** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: \_\_\_\_\_ Application Number: \_\_\_\_\_

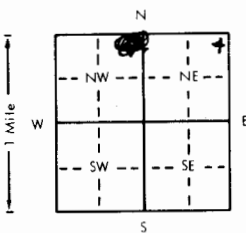
3 DEPTH OF COMPLETED WELL: **102** ft. Bore Hole Diameter: **8** in. to **102** ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Well Water to be used as:  
 1 Domestic     3 Feedlot     5 Public water supply     8 Air conditioning     11 Injection well  
 2 Irrigation     4 Industrial     6 Oil field water supply     9 Dewatering     12 Other (Specify below)  
 7 Lawn and garden only     10 Observation well  
 Well's static water level: **60** ft. below land surface measured on \_\_\_\_\_ month **21** day **79** year  
 Pump Test Data: \_\_\_\_\_ Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield **50** gpm: \_\_\_\_\_ Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

4 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  
 \_\_\_\_\_ Threaded  
 Blank casing dia: **5** in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface: **15** in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No: **258**

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel     3 Stainless steel     5 Fiberglass     7 PVC     10 Asbestos-cement  
 2 Brass     4 Galvanized steel     6 Concrete tile     8 RMP (SR)     11 Other (specify) \_\_\_\_\_  
 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 \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Screen-Perforated Intervals: From **92** ft. to **102** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Gravel Pack Intervals: From **15** ft. to **102** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

5 GROUT MATERIAL:  Neat cement     2 Cement grout     3 Bentonite     4 Other \_\_\_\_\_  
 Grouted Intervals: From **3** ft. to **15** 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) \_\_\_\_\_  
 Direction from well: **ne** How many feet: **100** ? 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: **Jacuzzi** Model No: **154C** HP **1** Volts **230**  
 Depth of Pump Intake: **74** ft. Pumps Capacity rated at **20** gal./min.  
 Type of pump:  1 Submersible     2 Turbine     3 Jet     4 Centrifugal     5 Reciprocating     6 Other \_\_\_\_\_

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **Jan** month **4** day **80** year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **140**  
 This Water Well Record was completed on **Jan** month **14** day **89** year under the business name of **Lyman Bros** by (signature) **Richard Lyman**

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
		0	10	soil and sand			
		10	24	fine sand			
		24	32	med sand			
		32	40	med to coarse sand			
		40	72	med sand			
		72	100	med to coarse sand			
	100	102	hard clay				

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.

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