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WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

County	Pratt	Fraction CN $\frac{1}{2}$ RKX	Section number 2	Township number T 27	Range number S R 15 E W
1. Location of well: 7 mi. Southwest of Byers, KS Street address of well location if in city:			3. Owner of well: Ivan Stotts R.R. or street: (?) City, state, zip code: Byers, KS 67021		
4. Locate with "X" in section below: <div style="text-align:center;">N --- NW --- X --- NE --- W SE E --- SW --- S --- 1 Mile</div>			Sketch map:		
5. Type and color of material			From	To	
Top soil			0	2	
Gray & brown clay			2	12	
Sandy clay & sandstone			12	50	
Brown clay, limestone & gravel streaks			50	60	
Sand & gravel			60	68	
Brown clay & limestone			68	73	
Sand & gravel			73	116	
Gray clay			116	117	
(Use a second sheet if needed)					
18. Elevation: Topography: ___ Hill ___ Slope ___ Upland ___ Valley	19. Remarks:		6. Bore hole dia. <u>24</u> in. Completion date <u>4-6-76</u> Well depth <u>117</u> ft.		
			7. ___ Cable tool ___ Rotary ___ Driven ___ Dug ___ Hollow rod ___ Jetted ___ Bored <input checked="" type="checkbox"/> Reverse rotary		
			8. Use: ___ Domestic ___ Public supply ___ Industry <input checked="" type="checkbox"/> Irrigation ___ Air conditioning ___ Stock ___ Lawn ___ Oil field water ___ Other		
			9. Casing: Material <u>Steel</u> Height: <u>Above</u> or below Threaded ___ Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP ___ PVC ___ Weight <u>30.3</u> lbs./ft. Dia. <u>16</u> in. to <u>77</u> ft. depth Wall thickness: inches or Dia. ___ in. to ___ ft. depth Gauge No. <u>7 ga.</u>		
			10. Screen: Manufacturer's name <u>W. A. Brown</u> Type <u>Double-slot</u> Dia. <u>16"</u> <u>Slot</u> gauze <u>1/8</u> Length <u>40'</u> Set between <u>77</u> ft. and <u>117</u> ft. Gravel pack? <u>Yes</u> Size range of material <u>3/8-200</u>		
			11. Static water level: mo./day/yr. <u>17 1/2</u> ft. below land surface Date <u>2-19-76</u>		
			12. Pumping level below land surfaces: N/C ___ 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. Yes <input checked="" type="checkbox"/> No ___ Date ___		
			14. Well head completion: ___ Pitless adapter <u>12</u> inches above grade		
			15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement ___ Bentonite ___ Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
			<u>NONE KNOWN</u> 16. Nearest source of possible contamination: ft. ___ Direction ___ Type ___ Well disinfected upon completion? ___ Yes <input checked="" type="checkbox"/> No ___		
			17. Pump: Manufacturer's name <u>FMC Corp./Peerless</u> Not installed Model number <u>12LB-3</u> HP <u>80</u> Volts ___ Length of drop pipe <u>70</u> ft. capacity <u>900</u> g.p.m. Type: ___ Submersible <input checked="" type="checkbox"/> Turbine ___ Jet ___ Reciprocating ___ Centrifugal ___ Other		
			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. <u>Clarke Well & Eq., Inc.</u> 185 Business name License No. ___ Address <u>Great Bend, KS</u> Signed <u>O.W. Clarke</u> Date <u>4-14</u> Authorized representative		

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

Form WWC-5