

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 820-1201-1215

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

1. Location of well:	County Kiowa	Fraction 1/4 1/4 CSW 1/4	Section number 30	Township number T 27 S R 17 E W	Range number
2. Distance and direction from nearest town or city: 6 1/2 mi. Northeast of Greensburg, KS Street address of well location if in city:			3. Owner of well: Don Pawley R.R. or street: (?) City, state, zip code: Clearwater, KS 67026		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 24 in. Completion date 12-13-75 (As Well depth 140 ft. far as we now know.)	
		7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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 Steel Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 30.3 lbs./ft. Dia. 16 in. to 80 ft. depth; Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth; gage No. 7 ga.	
5. Type and color of material			From	To	10. Screen: Manufacturer's name W. A. Brown
Sand			0	15	Type Double-slot Dia. 16" <input checked="" type="checkbox"/> Slo gauge 1/8 Length 60' Set between 80 ft. and 140 ft. ft. and _____ ft. Gravel pack? Yes Size range of material 3/8-200
Sandy clay & sand streaks			15	42	11. Static water level: _____ mo./day/yr. 44 ft. below land surface Date 12-13-75
Sand, gravel & clay streaks			42	52	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.
Sand & gravel			52	109	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
XXX Brown clay			109	124	14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade
Sand & gravel			124	137	15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.
Brown clay			137	140	16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(Use a second sheet if needed)					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name XXXXXXXXXXXXXXXXXXXX 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
					18. Elevation:
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					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. Clarke Well & Eq., Inc. 185 Business name License No. Address Great Bend, KS Signed <i>Don H. Clarke</i> Date 3-3-76 Authorized representative

22 170 30 CSW 1/4 1/4 9/4
 T R Sec

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

Form WWC-5

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 Kiowa	Fraction 1/4 1/4 CSW 1/4	Section number 30	Township number T 27 S R	Range number 17	W
2. Distance and direction from nearest town or city: east of Greensburg, KS 6 1/2 mi. North-			3. Owner of well: Gary Taylor			
Street address of well location if in city:			R.R. or street: Route 3			
			City, state, zip code: Great Bend, KS 67530			
4. Locate with "X" in section below:			Sketch map:			
5. Type and color of material			From	To	6. Bore hole dia. _____ in. Completion date 4-15-76 Well depth _____ ft.	
Refer to Well Record dated 3-3-76 under Don					7. <input type="checkbox"/> Cable tool <input 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	
Pawley, Owner. This well was then sold 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other	
Gary Taylor and completed with pump, etc.					9. Casing: Material _____ Height Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gage No. _____	
					10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot gauge _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____	
					11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____	
					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 type="checkbox"/> No Date _____	
					14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
					15. Well grouted? _____ With: _____ Neat cement _____ Bentonite _____ Concrete Depth: From _____ ft. to _____ ft.	
					16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: _____ Not installed Manufacturer's name FMC Corp/Peerless Model number 12LR-2 HP 60 Volts 460 Length of drop pipe 80 ft. capacity 900 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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. Clarke Well & Eq., Inc. 185 Business name License No. Address Great Bend, KS 67530 Signed _____ Date 4-20-76 Authorized representative			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

22 12 W 30 CSW 1/4 1/4 9/16

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