

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 <b>Kiowa</b>	Fraction <b>1/4 1/4 CSE 1/4</b>	Section number <b>5</b>	Township number <b>T 27 S R 18 E W</b>	Range number
2. Distance and direction from nearest town or city: <b>8 mi. North of <del>XXXXXXXXXX</del> Greensburg, KS</b> Street address of well location if in city:			3. Owner of well: <b>Allan F. Robb</b> R.R. or street: <b>Le Grand Pin, Parc Cezanne, Route du</b> City, state, zip code: <b>Tholonet, 13100 Aix-en-Provence, FRANCE</b>		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <u>24</u> in. Completion date <u>3-31-76</u> Well depth <u>144</u> ft.
Top soil			0	3	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
Sandy clay			3	9	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
Sand & gravel			9	15	9. Casing: Material <u>Steel</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>30.3</u> lbs./ft. Dia. <u>16</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. <u>16</u> in. to <u>124</u> ft. depth gage No. <u>7 ga.</u>
Sand, & sandy clay			15	26	10. Screen: Manufacturer's name <u>Doerr</u> Type <u>Double-slot</u> Dia. <u>16"</u> <input checked="" type="checkbox"/> Slot gauze <u>1/8</u> Length <u>60'</u> Set between <u>60</u> ft. and <u>100</u> ft. <u>124</u> ft. and <u>144</u> ft. Gravel pack? <u>Yes</u> Size range of material <u>3/8-200</u>
Sand, gravel & clay streaks			26	43	11. Static water level: _____ mo./day/yr. <u>32</u> ft. below land surface Date <u>3-13-76</u>
Yellow clay			43	49	12. Pumping level below land surfaces: <u>N/C</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
Sand & gravel			49	98	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
Brown & white clay & limestone			98	105	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade
Sand & gravel			105	110	15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.
Brown & <del>white</del> white clay & limestone			110	124	16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Sand & gravel			124	144	17. Pump: _____ Not installed Manufacturer's name <u>FMC Corp./Peerless</u> 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: <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. <b>Clarke Well &amp; Eq., Inc.</b> 185 Business name License No. Address <u>Great Bend, KS</u> Signed <u>[Signature]</u> Date <u>4-14-76</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

27  
18  
CSE  
1/4  
1/4  
76  
1/4

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

Form WWC-5