

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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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

1. Location of well:	County: <u>PRATT</u>	Fraction: <u>NW 1/4 NW 1/4 NW 1/4</u>	Section number: <u>25</u>	Township number: <u>T 28 S</u>	Range number: <u>R 12 W E</u>
2. Distance and direction from nearest town or city: <u>35 8 E OF PRATT</u>			3. Owner of well: <u>LEE HAMM</u>		
Street address of well location if in city: <u>PRATT</u>			City, state, zip code: <u>PRATT, KS 67124</u>		
4. Locate with "X" in section below:			6. Bore hole dia. <u>10</u> in. Completion date <u>26 APR 77</u>		
			Well depth <u>90</u> ft.		
			7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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		
			8. Use: <input checked="" 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		
			9. Casing: Material <input type="checkbox"/> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>70</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>257</u>		
5. Type and color of material			From	To	10. Screens: Manufacturer's name <u>34L</u>
<u>SOIL</u>			<u>0</u>	<u>2</u>	Type <u>RMP</u> Dia. <u>5"</u>
<u>CLAY, TAN</u>			<u>2</u>	<u>6</u>	Slot/gauze <u>1/8</u> Length <u>20'</u>
<u>SAND, COARSE & MED TO COARSE GRAVEL</u>			<u>6</u>	<u>20</u>	Set between <u>70</u> ft. and <u>90</u> ft.
<u>CLAY, YELLOW & WHITE</u>			<u>20</u>	<u>40</u>	Gravel pack? <u>Yes</u> Size range of material <u>1/4 - 1/2</u>
<u>SAND, FINE TO COARSE & MED GRAVEL</u>			<u>40</u>	<u>60</u>	11. Static water level: <u>58</u> ft. below land surface Date <u>26 APR 77</u>
<u>CLAY, YELLOW</u>			<u>60</u>	<u>66</u>	12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>75</u> g.p.m.
<u>SAND, COARSE & MED TO COARSE GRAVEL</u>			<u>66</u>	<u>95</u>	13. Water sample submitted: ____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date ____
<u>SAND, COARSE & MED TO COARSE GRAVEL (LOOSE)</u>			<u>95</u>	<u>103</u>	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>12</u> inches above grade
					15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>4</u> ft. to <u>14</u> ft.
					16. Nearest source of possible contamination: ft. <u>130</u> Direction <u>SE</u> Type <u>SEPTIC</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>STA-RITE</u> Model number <u>SER 20</u> HP <u>3/4</u> Volts <u>240</u> Length of drop pipe <u>87</u> ft. capacity ____ g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> 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>CENTRAL WELL & PUMP</u> <u>325</u> Business name License No. Address <u>121 S. TAYLOR PRATT</u> Signed <u>[Signature]</u> Date <u>26 APR 77</u> Authorized representative
18. Elevation:			19. Remarks: <u>4'x4'x4" CONCRETE SLAB WAS PLACED BELOW PITLESS ADAPTER</u>		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 28 R 12 W E 25

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

Form WWC-5