

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 Pratt	Fraction 1/4 1/4 CSW1/4	Section number 36	Township number T 28 S R 12	Range number EW
2. Distance and direction from nearest town or city: 13 mi. Southeast of Pratt, KS Street address of well location if in city:				3. Owner of well: Roger House R.R. or street: (?) City, state, zip code: Isabel, KS 67065		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. 24 in. Completion date 5-17-76 Well depth 160 ft.		
5. Type and color of material		From	To	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		
Top soil		0	3	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		
White & brown clay & limestone		3	22	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.		
Sand & gravel		22	30	10. Screen: Manufacturer's name Doerr Type Double-slot Dia. 16" Slot/gauze 1/8 Length 80' Set between 80 ft. and 160 ft. ft. and <input type="checkbox"/> ft. Gravel pack? Yes Size range of material 3/8-200		
Brown & white clay & limestone		30	50	11. Static water level: <input type="checkbox"/> mo./day/yr. 57 ft. below land surface Date 5-5-76		
Sand & gravel		50	59	12. Pumping level below land surfaces: N/C <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.		
Brown & white clay & limestone		59	67	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>		
Sand & gravel		67	114	14. Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade		
Brown clay & hard limestone		114	132	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.		
Sand & XXXXXX gravel		132	159	16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Gray clay		159	160	17. Pump: <input type="checkbox"/> Not installed Manufacturer's name FMC Corp./Peerless Model number 12LB-3 HP 80 Volts <input type="checkbox"/> Length of drop pipe 100 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		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 Great Bend, KS License No. <input type="checkbox"/> Address <input type="checkbox"/> Signed [Signature] Date 5-28-76 Authorized representative		

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

Form WWC-5