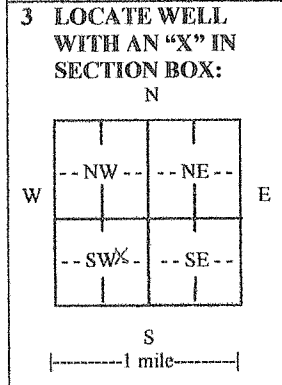


1 LOCATION OF WATER WELL: County: Pratt	Fraction NW ¼ SW ¼ NE ¼ SE ¼	Section Number 4	Township No. T 28 S	Range Number R 13 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/> .		Global Positioning System (GPS) information: Latitude: .37.63607..... (in decimal degrees) Longitude: -98.74364..... (in decimal degrees) Elevation: 1872' Datum: <input type="checkbox"/> WGS 84, <input checked="" type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		

2 WATER WELL OWNER: City of Pratt Municipal Plant
 RR#, Street Address, Box #: 321 West 10th Street
 City, State, ZIP Code : Pratt, Ks. 67124



4 DEPTH OF COMPLETED WELL 40..... ft.
 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL 32.79.....ft. below land surface measured on mo/day/yr. 9/5/2014.....
 Pump test data: Well water was.....ft. after..... hours pumping..... gpm
 EST. YIELD.....gpm. Well water was.....ft. after..... hours pumping..... gpm
 Bore Hole Diameter 8.25.....in. toft., andin. toft.
 WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below)
 Irrigation Industrial Domestic-lawn & garden Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes No
 If yes, mo/day/yr sample was submitted.....
 Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel PVC Other
CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter .2..... in. to ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface..... in., Weightlbs./ft., Wall thickness or gauge No. sch 40.....
TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel PVC Other (Specify)
 Brass Galvanized Steel None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
 Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify)
SCREEN-PERFORATED INTERVALS: From .25..... ft. to 40..... ft., From ft. to ft.
GRAVEL PACK INTERVALS: From .23..... ft. to 40..... ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
 Grout Intervals: From .0..... ft. to .23..... ft., From ft. to ft., From ft. to ft.
 What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well
 Direction from well Distance from well

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	10	Sand, some silt, reddish brown, dry, no odor	25	32	Sandy clay, medium to dark brown, no odor
10	14	Silty sand, light brown, fine no odor	32	40	Sand, tan to light brown, fine to ,medium, some gravel, well sorted
14	16	Clayey sand, light brown, fine no odor			no odor, saturated at 33'
16	20	Sandy clay, brown, soft no odor			
20	25	Silty clay, dark brown, stiff some sand, no odor			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 9/4/14..... and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 604..... This Water Well Record was completed on (mo/day/year) 9/18/14.....
 under the business name of Environmental Priority Service, Inc..... by (signature) J. St. ...

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>