

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

County Pratt		Fraction se se se <div style="display: flex; justify-content: space-around; width: 100%;"> 1/4 1/4 1/4 </div>		Section number 27		Township number 28		Range number 13		E/W	
Location of well: IN Pratt 281				3. Owner of well: Freeman Toot Rt 3 Pratt				City, state, zip code:			
Distance and direction from nearest town or city:				Street address of well location if in city:				4. Locate with "X" in section below:			
Sketch map:				6. Bore hole dia 8 in. Completion date 9-11-78 Well depth 100 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			
1 Mile 				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"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <input type="checkbox"/> in. RMP 5 <input checked="" type="checkbox"/> PVC 100 Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 100 ft. depth Wall Thickness: inches or Dia. 5 in. to 100 ft. depth Gauge No. 258			
5. Type and color of material				From		To		10. Screen: Manufacturer's name pumpco Type pvc Dia. 5 Slot/gauze 865 Length 10 Set between 100 ft. and 100 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/2 in			
soil				0		4		11. Static water level: 66 ft. below land surface Date 9-11-78			
clay				4		22		12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 50 g.p.m.			
med to coarse sand				22		86		13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
clay				86		88		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 12 Inches above grade			
med sand w/ gravel				88		100		15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement 4 <input type="checkbox"/> Bentonite 15 <input type="checkbox"/> Concrete Depth: From 4 ft. to 15 ft.			
(Use a second sheet if needed)				16. Nearest source of possible contamination: _____ ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		17. Pump: Not installed Manufacturer's name Iacuzzi Model number 7S4B HP 3/4 Volts 230 Length of drop pipe 88 ft. capacity 20 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					
18. Elevation:				19. Remarks: customer to pour slab				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. Lyman Bros 140 Business name Med. Lodge, Ks License No. _____ Address WA Signed WA 9-15- Authorized representative Date			

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

Form WWC-5

MI-1023