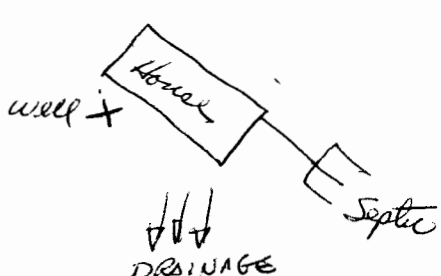


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 NW 1/4 NW 1/4 NE 1/4	Section number 15	Township number T 28 S	Range number R 14 W E/W		
2. Distance and direction from nearest town or city: 25 5 1/2 W Street address of well location if in city: of Pratt, KS			3. Owner of well: GEORGE CROSS R.R. or street: City, state, zip code: PRATT, KS					
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. 10 in. Completion date 2 NOV 78 Well depth 140 ft.				
5. Type and color of material		From		To		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 <input type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 120 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 258		
						10. Screen: Manufacturer's name Perless Type Saw slot Dia. 5 Slot/gauze 48 Length 20' Set between 120 ft. and 140 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4" X 1/2"		
						11. Static water level: <input type="checkbox"/> mo./day/yr. 78 ft. below land surface Date 2 NOV 78		
						12. Pumping level below land surfaces: <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 60 g.p.m.		
						13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date		
						14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 12 Inches above grade		
						15. Well grouted? <input checked="" type="checkbox"/> With <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 4 ft. to 14 ft.		
						16. Nearest source of possible contamination: ft. 100 Direction EAST Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
						17. Pump: Manufacturer's name STA RITE Not installed Model number 20 HP 1 Volts Length of drop pipe 110 ft. capacity 25 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		
						(Use a second sheet if needed)		
						18. Elevation:	19. Remarks: 4' X 4' X 4" slab poured below pitless adapter	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. Central Well & Pump 325 Business name License No. Address 121 S. TAYLOR PRATT KS Signed SPR Date 20 NOV 78 Authorized representative
						Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		

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

Form WWC-5