

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 Kiowa	Fraction c 1/4 sw 1/4 ne 1/4	Section number 6	Township number T 28 S R 20 EW	Range number
2. Distance and direction from nearest town or city: 6 W 8 N of Mullinville, Ks.			3. Owner of well: Pickrell Drilling Co.			
Street address of well location if in city: 3-w 3 1/2-N west side from			R.R. or street: Litwin Bldg. Suite 205			
4. Locate with "X" in section below: Sketch map:			City, state, zip code: Wichita, Kansas 67202			
			6. Bore hole dia. 8 3/4" Completion date _____ Well depth 80 ft. 12-8-78			
5. Type and color of material			7. <input 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 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 checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other			
			9. Casing: Material PVC Height: Above or Below Threaded _____ Welded _____ Surface 18 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 4 1/2 in. to 80 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. .237			
			10. Screen: Manufacturer's name _____ CertainTeed Type pvc Dia. _____ Slot/size 1/16 Length 20 Set between 40 ft. and 60 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 13/4 3/8			
			11. Static water level: _____ mo./day/yr. 36 ft. below land surface Date 12-8-78			
			12. Pumping level below land surfaces: 36 ft. after 1 hrs. pumping 80 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 120 g.p.m.			
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ 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 0 ft. to 10 ft.			
			16. Nearest source of possible contamination: ft. 110 Direction SW Type oilwell Well disinfected upon completion? hth Yes <input type="checkbox"/> No <input type="checkbox"/>			
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input 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:		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.		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				Business name Rosencrantz Bemis License No. 134 Address Great Bend, Ks. 67530 Signed Sandy K. Moore Date 1-8-80 Authorized representative		

T 28 S R 20 EW Sec 6 SW NE 1/4 1/4 1/4

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

Form WWC-5