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2-16-77

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 <b>Grant</b>	Fraction <b>NW 1/4 SW 1/4 SE 1/4</b>	Section number <b>32</b>	Township number <b>T 28 S</b>	Range number <b>R 38 E/W</b>
2. Distance and direction from nearest town or city: <b>7 W, 1 S, and 1/4 W of Ulysses, Kansas.</b>			3. Owner of well: <b>AMOCO Production Co.</b> R.R. or street: <b>P. O. Box 507</b> City, state, zip code: <b>Ulysses, Kansas</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>28</u> in. Completion date _____ Well depth <u>565</u> ft. <u>2/14/77</u>		
		<p>675' N &amp; 50' E of SW corner of the SE 1/4, Sec. 32, T28S, R38W, Grant County, Kansas.</p>		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		
5. Type and color of material				From	To	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" 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
Top soil				0	4	9. Casing: Material <u>stl</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>37</u> lbs./ft. Dia. <u>16</u> in. to <u>366</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>219</u>
Tan clay				4	106	10. Screen: Manufacturer's name <u>Cook, Doerr Foster</u> Type <u>louvered, w/w</u> Dia. <u>16</u> in. millslot <u>16</u> " Slot/gauze <u>1/16</u> in. Length <u>200</u> Set between <u>366</u> ft. and <u>566</u> ft. _____ ft. and _____ ft.
Fine to coarse sand clay streaks				106	154	Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>2.0-3.8mm</u>
Tan clay fine sand streaks				154	284	11. Static water level: _____ mo./day/yr. <u>222</u> ft. below land surface Date <u>11/16/76</u>
Fine sand clay streaks				284	318	12. Pumping level below land surfaces: <u>322</u> ft. after <u>1</u> hrs. pumping <u>1100</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
Tan sandy clay				318	366	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____
Fine to coarse sand				366	406	14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade
Black shale				406	442	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>20</u> ft.
Fine sand clay streaks				442	565	16. Nearest source of possible contamination: <u>unk</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Red bed				565	580	17. Pump: _____ Not installed Manufacturer's name <u>Layne &amp; Bowler</u> Model number <u>10 KEH</u> HP _____ Volts _____ Length of drop pipe <u>480</u> ft. capacity <u>500</u> 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
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. <b>Layne-Western Co., Inc. 102</b> Business name License No. Address <u>Garden City, Kansas</u> Signed <u>[Signature]</u> Date <u>14 Feb 77</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)				

28  
38  
32  
NW 1/4 SE 1/4  
1/4 1/4 1/4  
Sec

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

Form WWC-5