

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 <u>Pratt</u>	Fraction <u>C SW 1/4</u>	Section number <u>33</u>	Township number <u>T 29 S</u>	Range number <u>R 11 W</u>
2. Distance and direction from nearest town or city: <u>1 mile East & 1/4 North of Isabel</u>			3. Owner of well: <u>Bernard Rolf</u> R.R. or street: <u>Isabel, Kansas</u> City, state, zip code:			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>30</u> in. Completion date <u>4/18/76</u> Well depth <u>180</u> ft.		
		Well No. 1 (TH 1-76)		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		
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		
5. Type and color of material		From	To	9. Casing: Material <u>Stl</u> Height: Above <u>ground</u> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>36.91</u> lbs./ft. Dia. <u>16</u> in. to <u>120</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>219</u>		
Top soil		0	2	10. Screen: Manufacturer's name <u>Doerr</u> <u>Metal Products</u> Type <u>Stl.</u> Dia. <u>16</u> " Slot/gauze <u> </u> Length <u>60</u> " Set between <u>109</u> ft. and <u>141</u> ft. <u>152</u> ft. and <u>180</u> ft. Gravel pack? <u>yes</u> Size range of material <u>1/8 x 3/8</u>		
Clay		2	45	11. Static water level: <u>56</u> ft. below land surface Date <u>6/28/76</u> mo./day/yr.		
Fine to coarse sand & gravel		45	110	12. Pumping level below land surfaces: <u>80</u> ft. after <u>2</u> hrs. pumping <u>900</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>1500</u> g.p.m.		
Clay		110	112	13. Water sample submitted: <u> </u> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u> </u>		
Med. to coarse sand & gravel		112	140	14. Well head completion: <u>12</u> inches above grade <input type="checkbox"/> Pitless adapter <u> </u>		
Clay		140	151	15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
Fine to coarse sand & fine gravel		151	165	16. Nearest source of possible contamination: ft. <u>2500</u> Direction <u>East</u> Type <u>Farm</u> Well disinfected upon completion? <u> </u> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Fine to coarse sand & fine gravel w/ some clay		165	179	17. Pump: <u> </u> Not installed Manufacturer's name <u>Layne</u> Model number <u>12 Km</u> HP <u>80</u> Volts <u> </u> Length of drop pipe <u>100</u> ft. capacity <u>900</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		
Red shale		179	185	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. <u>Layne Western Co.</u> 102 Business name <u>Wichita, Kansas</u> License No. <u> </u> Address <u> </u> Signed <u> </u> Date <u>3/1/76</u> Authorized representative		
(Use a second sheet if needed)						
18. Elevation: <u>1832</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>26406</u> <u>29 11 33 NCX</u>					

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

Form WWC-5