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

TURKEY CREEK

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

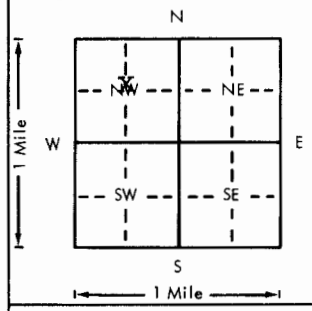
TB (center)

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Clark	1/4 1/4 CNW1/4	11	T 30 S	R 21W E/W

2. Distance and direction from nearest town or city: 7s 3e
Street address of well location if in city: Bucklin, Ks.

3. Owner of well: Red Tiger Drlg Co.
R.R. or street: 1720 Ks St Bk Bldg
City, state, zip code: Wichita, Ks. 67202

4. Locate with "X" in section below: Sketch map:



6. Bore hole dia. 8 in. Completion date
Well depth 192 ft. 3-22-78

7. X Cable tool ___ Rotary ___ Driven ___ Dug
___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary

8. Use: ___ Domestic ___ Public supply ___ Industry
___ Irrigation ___ Air conditioning ___ Stock
___ Lawn X Oil field water ___ Other

9. Casing: Material ___ Height: Above ~~XXXX~~
Threaded ___ Welded ___ Surface 12 in.
RMP ___ PVC X Weight 2.8 lbs./ft.
Dia. 5 in. to 192 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. sch 40

5. Type and color of material	From	To
Top Soil-Clay	0	90
Clay	90	120
Sandy Clay	120	145
Sand-Clay Stks	145	192
B ROCK 192'		
125		
67 sqft		
in 8		

10. Screen: Manufacturer's name Jetstream
Type pvc Dia. 5"
Slot/gauze 1/32" Length 40
Set between 152 ft. and 192 ft.
ft. and ft.
Gravel pack? X Size range of material 1/8-3/4"

11. Static water level: mo./day/yr.
125 ft. below land surface Date 3-22-78

12. Pumping level below land surfaces:
ft. after hrs. pumping g.p.m.
ft. after hrs. pumping g.p.m.
Estimated maximum yield 60 g.p.m.

13. Water sample submitted: mo./day/yr.
___ Yes X No Date

14. Well head completion:
___ Pitless adapter 12 Inches above grade

15. Well grouted? X
With: ___ Neat cement X Bentonite ___ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination: oil test
ft. 50 Direction S Type
Well disinfected upon completion? ___ Yes X No

17. Pump: X Not installed
Manufacturer's name
Model number HP Volts
Length of drop pipe ft. capacity g.p.m.
Type:
___ Submersible ___ Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

(Use a second sheet if needed)

18. Elevation:
Topography:
___ Hill
___ Slope
X Upland
___ Valley

19. Remarks:
TOP
2338
17
2146

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.
Business name Kellys Waterwell Ser 186 License No.
Address R2 Great Bend, Ks.
Signed Kelly Price Date 9-17-79
Authorized representative

T 30 R 21 (W) E Sec 11 1/4 1/4 1/4 CNW

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

Form WWC-5

MI-1023