

*Cope*

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

*Booth #1*

1. Location of well: <i>Cornucopia</i>		County: <i>Cornucopia</i>	Fraction: <i>C 1/4 NE 1/4 SE 1/4</i>	Section number: <i>12</i>	Township number: <i>T 31 S</i>	Range number: <i>R 18 W</i>
2. Distance and direction from nearest town or city: <i>Wilmar, KS 1 1/2 mile north west side</i>			3. Owner of well: <i>D.P. Lauck</i> R.R. or street: <i>815 3/4 Barton</i> City, state, zip code: <i>Great Bend, KS 66753</i>			
4. Locate with "X" in section below:		Sketch map:				
5. Type and color of material			From	To	6. Bore hole dia. <i>9</i> in. Completion date <i>10-19-78</i> Well depth <i>170</i> ft.	
<i>Sandy Clay</i>			<i>0</i>	<i>25</i>	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	
<i>Clay</i>			<i>25</i>	<i>90</i>	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	
<i>Sandy Clay</i>			<i>90</i>	<i>120</i>	<input checked="" type="checkbox"/> Casing: Material _____ Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <i>12</i> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <i>278-3</i> lbs./ft. Dia. <i>5</i> in. <i>170</i> ft. depth Wall Thickness: _____ or Dia. _____ in. to _____ ft. depth Gauge No. <i>200, 265</i>	
<i>GRAVEL</i>			<i>120</i>	<i>170</i>	10. Screen: Manufacturer's name _____ <i>Peerless</i> Type <i>Saw</i> Dia. <i>5</i> (Slo) gauze <i>1/8</i> Length <i>20</i> Set between <i>170</i> ft. and <i>150</i> ft. _____ ft. and _____ ft. Gravel pack <i>yes</i> Size range of material <i>1/2-1/8</i>	
					11. Static water level: _____ mo./day/yr. <i>68</i> ft. below land surface Date <i>10-19-78</i>	
					12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
					14. Well head completion: <input type="checkbox"/> Pitless adapter <i>12</i> inches above grade	
					15. Well grouted? <i>yes</i> With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.	
					<input checked="" type="checkbox"/> 16. Nearest source of possible contamination: _____ Direction _____ Type <i>None</i> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
					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. <i>Muee Water Well 143</i> Business name _____ License No. _____ Address <i>Great Bend</i> Signed <i>Steve Rosendall</i> Date <i>10-19</i> Authorized representative		

T 31 R 18 W Sec 12

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

Form WWC-5