

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 Comanche	Fraction CN/2⁴ NE 1/4 SW 1/4	Section number 8	Township number T 33 S R 20 W E/W	Range number
2. Distance and direction from nearest town or city: 2 west of Protection south side of road				Owner of well: H-30		
Street address of well location if in city:				R.R. or street: Box 982		
				City, state, zip code: Pratt, Kansas 67124		
<input checked="" type="checkbox"/> Locate with "X" in section below:		Sketch map:		6. Bore hole dia <u>9 7/8</u> in. Completion date _____ Well depth <u>75</u> ft. <u>7-31-78</u>		
				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		
5. Type and color of material		From	To	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		
Top soil		0	6	9. Casing: Material <u>PVC</u> Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>24</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>2.8</u> lbs./ft. Dia. <u>5</u> in. to <u>75</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>265</u>		
Clay		6	20	10. Screen: Manufacturer's name Jess & Lowell Type <u>PVC</u> Dia. <u>5"</u> Slot/gauge <u>1/8"</u> Length <u>60'</u> Set between <u>15</u> ft. and <u>75</u> ft. _____ ft. and _____ ft. Gravel pack? Yes Size range of material <u>1/64-5/32</u>		
Liver mud		20	70	11. Static water level: _____ mo./day/yr. <u>35</u> ft. below land surface Date <u>7/31/78</u>		
Red Bed		70	80	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>30</u> _____ g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>24</u> inches above grade		
				15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: ft. <u>100</u> Direction <u>East</u> Type <u>oil well</u> Well disinfected upon completion? XX Yes _____ No _____		
				<input checked="" type="checkbox"/> Pump: _____ Not installed Manufacturer's name <u>Customer installed</u> Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible _____ Turbine _____ <input type="checkbox"/> Jet _____ Reciprocating _____ <input type="checkbox"/> Centrifugal _____ 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. Friesen Windmill <u>252</u> Business name License No. Address <u>Meade, Kansas</u> <u>67864</u> Signed <u>[Signature]</u> Date <u>9-2-78</u> Authorized representative			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

T 33 S R 20 W E/W
 Sec 8
 1/4 1/4 1/4 1/4
 CN/2 NE SW

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

Form WWC-5