

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 Sheridan	Fraction SW 1/4 NE 1/4 NE 1/4	Section number 21	Township number 8	Range number 28	E/W E/W																																																																																										
2. Distance and direction from nearest town or city: 2 South 1/4 West of Hoxie Street address of well location if in city:				3. Owner of well: Fred Pratt R.R. or street: 1400 Sheridan Avenue City, state, zip code: Hoxie, Ks. 67740																																																																																													
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. 1 3/4 in. Completion date 9-6-80 Well depth _____ ft.																																																																																													
				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																																																																																													
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Oil field water <input type="checkbox"/> Other																																																																																													
5. Type and color of material				9. Casing: Material Styrene Weight: Above or below Threading _____ Welded _____ Surface 1 1/2 in. RMP _____ PVC _____ Weight 1.75 lbs./ft. Dia. 5 in. to 1 3/4 ft. depth Wall Thickness _____ inches or Dia. _____ in. to _____ ft. depth gauge No. 214																																																																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr><td>Sand & Clay</td><td>0</td><td>42</td></tr> <tr><td>Medium Sand</td><td>42</td><td>44</td></tr> <tr><td>Clay</td><td>44</td><td>46</td></tr> <tr><td>Medium Sand</td><td>46</td><td>47</td></tr> <tr><td>Caliche</td><td>47</td><td>51</td></tr> <tr><td>Clay</td><td>51</td><td>53</td></tr> <tr><td>Fine to Medium Sand</td><td>53</td><td>59</td></tr> <tr><td>Cemented & Caliche</td><td>59</td><td>61</td></tr> <tr><td>Clay & Caliche Layer</td><td>61</td><td>71</td></tr> <tr><td>Caliche & Cemented Sand</td><td>71</td><td>75</td></tr> <tr><td>Caliche & Sand Layer</td><td>75</td><td>77</td></tr> <tr><td>Clay</td><td>77</td><td>79</td></tr> <tr><td>Caliche & Clay</td><td>79</td><td>82</td></tr> <tr><td>Fine Sand</td><td>82</td><td>85</td></tr> <tr><td>Clay & Caliche</td><td>85</td><td>90</td></tr> <tr><td>Fine Sand</td><td>90</td><td>92</td></tr> <tr><td>Caliche</td><td>92</td><td>93</td></tr> <tr><td>Clay</td><td>93</td><td>101</td></tr> <tr><td>Fine Sand</td><td>101</td><td>102</td></tr> <tr><td>Clay</td><td>102</td><td>106</td></tr> <tr><td>Fine to Medium Sand</td><td>106</td><td>113</td></tr> <tr><td>Clay</td><td>113</td><td>116</td></tr> <tr><td>Medium Sand</td><td>116</td><td>126</td></tr> <tr><td>Clay</td><td>126</td><td>129</td></tr> <tr><td>Fine Sand</td><td>129</td><td>130</td></tr> <tr><td>Clay</td><td>130</td><td>131</td></tr> <tr><td>Sand</td><td>131</td><td>135</td></tr> <tr><td>Ochre</td><td>135</td><td>136</td></tr> <tr><td>Shale</td><td>136</td><td>140</td></tr> </tbody> </table>					From	To	Sand & Clay	0	42	Medium Sand	42	44	Clay	44	46	Medium Sand	46	47	Caliche	47	51	Clay	51	53	Fine to Medium Sand	53	59	Cemented & Caliche	59	61	Clay & Caliche Layer	61	71	Caliche & Cemented Sand	71	75	Caliche & Sand Layer	75	77	Clay	77	79	Caliche & Clay	79	82	Fine Sand	82	85	Clay & Caliche	85	90	Fine Sand	90	92	Caliche	92	93	Clay	93	101	Fine Sand	101	102	Clay	102	106	Fine to Medium Sand	106	113	Clay	113	116	Medium Sand	116	126	Clay	126	129	Fine Sand	129	130	Clay	130	131	Sand	131	135	Ochre	135	136	Shale	136	140	10. Screen: Manufacturer's name _____ Styrene Dia. 5 in. Type Slot Dia. _____ Slot/gauze 117 Length _____ Set between _____ ft. and 1 3/4 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 in.			
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11. Static water level: 39 ft. below land surface Date 9-8-80 mo./day/yr.				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: Yes <input checked="" type="checkbox"/> No _____ Date _____ mo./day/yr.				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ inches above grade																																																																																													
15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From 0 ft. to 10 ft.				16. Nearest source of possible contamination: Septic Tank ft. 300 Direction SW Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____																																																																																													
17. Pump: _____ 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				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. F & W Drilling 394A Business name _____ Address Rt. 1 Hoxie, Ks. 67740 Signed Walter Wolf Date _____ Authorized representative																																																																																													
18. Elevation:		19. Remarks:		20. (Continued from previous section)																																																																																													
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley																																																																																																	

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

Form WWC-5