

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 <b>Lane</b>	Fraction <b>SW 1/4 SW 1/4 SW 1/4</b>	Section number <b>219</b>	Township number T <b>16</b> S R	Range number <b>30 E (W)</b>
2. Distance and direction from nearest town or city: <b>8N, 14E, 3N of</b>			3. Owner of well: <b>Huck Farms</b>			
Street address of well location if in city: <b>Scott City, Kansas</b>			R.R. or street: <b>1018 Russell</b>			
			City, state, zip code: <b>Scott City, KS 67871</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>26</u> in. Completion date _____		
		<p style="text-align: center;"><i>X well</i> <i>↓ 1/2 mi.</i> <span style="border: 1px solid black; padding: 2px;">Septic</span></p>		Well depth <u>180</u> ft. <u>3-28-77</u>		
				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		
				9. Casing: Material <u>Steel</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>10</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>31.67</u> lbs./ft. Dia. <u>16</u> in. to <u>180</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>188</u>		
5. Type and color of material		From	To	10. Screen: Manufacturer's name <u>Johnson &amp; Galv. &amp; Prime</u> <u>Free Flow</u>		
<b>Clay</b>		0	17	Type <u>Steel</u> Dio. <u>16 in.</u>		
<b>Gyp</b>		17	34	<input checked="" type="checkbox"/> gauze <u>100 &amp; 125</u> Length <u>30 ft.</u>		
<b>Clay 'sdy'</b>		34	50	Set between <u>150</u> ft. and <u>180</u> ft.		
<b>Fine sd clay</b>		50	72	Gravel pack? <u>yes</u> Size range of material <u>3/4-1/4</u>		
<b>Sd coarse</b>		72	85	11. Static water level: _____ mo./day/yr. <u>120</u> ft. below land surface Date <u>2-17-77</u>		
<b>Fine sd clay</b>		85	147	12. Pumping level below land surfaces: <u>160</u> ft. after <u>4</u> hrs. pumping <u>450</u> g.p.m. <u>165</u> ft. after <u>4</u> hrs. pumping <u>500</u> g.p.m. Estimated maximum yield <u>500</u> g.p.m.		
<b>Sd coarse</b>		147	157	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
<b>Clay</b>		157	159	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade		
<b>Sd coarse</b>		159	165	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.		
<b>Clay</b>		165	169	16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>South</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Sd coarse</b>		169	177	17. Pump: _____ Not installed Manufacturer's name <u>Layne &amp; Bowler</u>		
<b>Clay yellow</b>		177	180	Model number _____ HP _____ Volts _____ Length of drop pipe <u>170</u> ft. capacity <u>500</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		
<b>Shale</b>		180	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. <b>Weishaar Drilling</b> 232 Business name _____ License No. _____ Address <u>Scott City, KS 67871</u> Signature _____ Date <u>3-31-77</u> Authorized representative		
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

16 300 21 SWSWSW  
R 1/4 1/4 1/4  
Sec

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

Form WWC-5