

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 Scott	Fraction SE 1/4 NW 1/4 SE 1/4	Section number 36	Township number T 16 S R 31	Range number E 1/4
2. Distance and direction from nearest town or city: 8N, 12E, 1 1/4 N, Street address of well location if in city: 1/4 W of Scott City, KS			3. Owner of well: Dale Graves R.R. or street: City, state, zip code: Healy, KS 67850			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: Septic ↑ 1/2 mi. X well		6. Bore hole dia. <u>26</u> in. Completion date _____ Well depth <u>185</u> ft. <u>4-3-75</u>	
5. Type and color of material			From	To	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	
Clay			0	18	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	
Gyp			18	45	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>185</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>188</u>	
Med sd			45	58	10. Screen: Manufacturer's name _____ Free Flow Type <u>Prime Steel</u> Dia. <u>16</u> in. <input checked="" type="checkbox"/> gauze <u>125</u> Length <u>40</u> ft. Set between <u>145</u> ft. and <u>185</u> ft. _____ ft. and _____ ft. Gravel pack <input checked="" type="checkbox"/> yes Size range of material <u>3/4-1/4</u>	
Sd rock H			58	73	11. Static water level: _____ mo./day/yr. <u>106</u> ft. below land surface Date <u>1-15-75</u>	
Fine sd clay T			73	84	12. Pumping level below land surfaces: <u>162</u> ft. after <u>8</u> hrs. pumping <u>190</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>190</u> g.p.m.	
Sd rock			84	85	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
Fine sd clay T			85	93	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
Sd rock			93	94	15. Well grouted? <input type="checkbox"/> 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.	
Clay sd			149	154	16. Nearest source of possible contamination: ft. <u>2640</u> Direction <u>N</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Sd fine			154	157	17. Pump: _____ Not installed Manufacturer's name <u>Simmons</u> Model number <u>GE</u> HP <u>15</u> Volts <u>460</u> Length of drop pipe <u>175</u> ft. capacity <u>190</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	
Clay			174	180	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. Weishaar Drilling 232 Business name License No. Address <u>Scott City, KS 67871</u> Signed <u>Dale Graves</u> Date <u>7-19-76</u> Authorized representative	
Sd coarse			180	181		
Clay yellow (Use a second sheet if needed)			181	183		
18. Elevation:		19. Remarks: Shale		183	185	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5