

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 NE 1/4 NE 1/4 NE 1/4	Section number 4	Township number T 17 S	Range number R 31 E/W
2. Distance and direction from nearest town or city: Seven miles west one north of Healy, Kans.			3. Owner of well: Mike Urban		
Street address of well location if in city:			City, state, zip code: Scott City, Kansas 67871		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>26</u> in. Completion date _____ Well depth <u>188</u> ft. <u>5/14/79</u>	
		<p style="text-align:center">Septic</p> <p style="text-align:center">1320'</p> <p style="text-align:center">Well</p>		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	
5. Type and color of material				<input checked="" type="checkbox"/> Casing: Material <u>steel</u> Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>10</u> in. RMP _____ PVC _____ Weight <u>3.67</u> lbs./ft. Dia. <u>5</u> in. to <u>155</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>188</u>	
		From	To	10. Screen: Manufacturer's name _____ Johnson	
clay		0	19	Type <u>galv steel</u> Dia. <u>16</u>	
gyp		19	37	Slot/gauze: <u>100</u> Length <u>30'</u>	
clay		37	47	Set between <u>158</u> ft. and <u>188</u> ft.	
sand		47	54	_____ ft. and _____ ft.	
rock		54	60	Gravel pack? <input checked="" type="checkbox"/> <u>yes</u> Size range of material <u>1 x 1/4"</u>	
clay		60	67	11. Static water level: _____ mo./day/yr. <u>115</u> ft. below land surface Date <u>3/28/79</u>	
rock		67	78	12. Pumping level below land surfaces:	
fine sand clay		78	87	<u>162</u> ft. after <u>4</u> hrs. pumping <u>162</u> g.p.m.	
rock		87	90	<u>171</u> ft. after <u>8</u> hrs. pumping <u>850</u> g.p.m.	
clay		90	110	Estimated maximum yield <u>850</u> g.p.m.	
fine sand clay		110	127	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
fine sand		127	139	14. Well head completion: _____ Pitless adapter <u>10</u> Inches above grade	
rock		139	143	15. Well grouted? <input checked="" type="checkbox"/> <u>yes</u>	
fine sand clay		143	150	With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete	
clay		150	157	Depth: From <u>0</u> ft. to <u>15</u> ft.	
sand		157	162	16. Nearest source of possible contamination: ft. <u>1320</u> Direction <u>north</u> Type <u>septic</u>	
rock		162	164	Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No	
sand		164	186	17. Pump: _____ Not installed	
clay yellow		186	187	Manufacturer's name <u>Western Land Roller</u>	
shale		187	190	Model number <u>E7944</u> HP _____ Volts _____	
				Length of drop pipe <u>175</u> ft. capacity <u>850</u> g.p.m.	
				Type: _____	
				<input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine	
				<input type="checkbox"/> Jet _____ Reciprocating	
				<input type="checkbox"/> Centrifugal _____ Other	
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. Weishaar Drilling & Supply 232 Business name _____ License No. _____ Address <u>Scott City, Kansas 67871</u> Signature <u>[Signature]</u> Date <u>6/7/79</u> Authorized representative	
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

17 3/10 4 NE 1/4 NE 1/4