

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 SE 1/4	Section number 27	Township number T 17 S	Range number R 31 E/W
2. Distance and direction from nearest town or city: 1/2 mile south of Manning Ks Street address of well location if in city:			3. Owner of well: Royce Gruver R.R. or street: RR# 1 City, state, zip code: Scott City, Ks. 67871		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. 9 5/8 in. Completion date _____ Well depth 190 ft. 9-10-80
Clay			0	60	7. <input checked="" 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
Sandy clay			60	120	8. Use: <input checked="" 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other
Sand, gravel streaks, clay			20	190	9. Casing: Material _____ Height <u>Above</u> or below Threaded _____ Welded <u>galv</u> Surface <u>2 1/2</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>2,368</u> lbs./ft. Dia. <u>5</u> in. to <u>190</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gauge No. <u>214</u>
					10. Screen: Manufacturer's name _____ <u>Peerless Plastic</u> Type <u>PVC</u> Dia. <u>5"</u> <u>Slot gauge .051x3"</u> Length <u>20"</u> Set between <u>170</u> ft. and <u>190</u> ft. Gravel pack? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/4</u>
					11. Static water level: _____ mo./day/yr. <u>85</u> ft. below land surface Date <u>9-10-80</u>
					12. Pumping level below land surfaces: <u>Blown</u> _____ ft. after <u>not pumped</u> _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>20</u> g.p.m.
					13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
					14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>2 1/2</u> Inches above grade
					15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>4</u> ft. to <u>1 1/2</u> ft.
					16. Nearest source of possible contamination: ft. _____ Direction _____ Type <u>NA</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					17. Pump: _____ Not installed Manufacturer's name <u>Could's</u> Model number <u>10E174</u> HP <u>3/4</u> Volts <u>230</u> Length of drop pipe <u>168</u> ft. capacity <u>12</u> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> 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. High Plains Drilling & Supply, Inc 136B Business name 5310 W. Hwy 50-RR#1, Garden City, Ks. Address Signed <u>Arthur H. Kuhlman</u> Date <u>10-8-80</u> Authorized representative License No. _____		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

17 31 W 27 NE NESE
T
R
Sec
1/4 1/4 1/4

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

Form WWC-5