

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

BDC

1. Location of well:		County Scott	Fraction S/W 1/4 S/E 1/4 N/W 1/4	Section number 22	Township number T 17 S R	Range number 34 #/W
2. Distance and direction from nearest town or city: 9 W., 6 N., 1/2 E. of Scott City, KS Street address of well location if in city:			3. Owner of well: HARMONY HOGS R.R. or street: RFD # 3 City, state, zip code: SCOTT CITY, KANSAS 67871			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>9</u> in. Completion date _____ Well depth <u>115</u> ft. <u>7/1/1978</u>		
		<p>Well hog-pen X ----- 100' ----- X</p>		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		
5. Type and color of material		From	To	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
clay		0	12	9. Casing: Material <u>Plastic</u> Height: Above or below Threaded <input type="checkbox"/> Welded <u>glue</u> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>1.8</u> lbs./ft. Dia. <u>5</u> in. to <u>95</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>95</u> ft. depth gage No. <u>250</u>		
rock		12	15	10. Screen: Manufacturer's name <u>Jess & Lowell</u> Type <u>RMP</u> Dia. <u>5"</u> Slot/gauze <u>1/16"</u> Length <u>20'</u> Set between <u>95</u> ft. and <u>115</u> ft. ft. and _____ ft.		
clay sandy		15	36	Gravel pack? <u>yes</u> Size range of material <u>1/8"</u>		
rock		36	40	11. Static water level: _____ mo./day/yr. <u>55</u> ft. below land surface Date <u>6/28/1978</u>		
clay		40	51	12. Pumping level below land surfaces: <u>80</u> ft. after <u>2</u> hrs. pumping <u>18</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>18</u> g.p.m.		
rock		51	53	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
clay sandy		53	88	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>.12</u> Inches above grade		
fine sand		88	100	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>15</u> ft.		
clay		100	105	16. Nearest source of possible contamination: ft. <u>100</u> Direction <u>East</u> Type <u>Hog pen</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
fine to med. sand		105	110	17. Pump: _____ Not installed Manufacturer's name <u>Red Jacket</u> Model number <u>W11CC</u> HP <u>1 1/2</u> Volts <u>250</u> Length of drop pipe <u>110</u> ft. capacity <u>18</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		
clay yellow		<u>110</u>	<u>115</u>	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 & Sup. 232 Business name _____ License No. _____ Address <u>Scott City, KS, 67871</u> Signature <u>[Signature]</u> Date <u>7/20/78</u> Authorized representative		
18. Elevation:		19. Remarks: BRock 110 55 55' set there		20. Water well contractor's certification: (continued)		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

17
34
22
S
W
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N
1/4
1/4
1/4
1/4

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

Form WWC-5