

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 Lane	Fraction NW 1/4 NW 1/4 SW 1/4	Section number 1	Township number T 18 S R	Range number 30 EW
2. Distance and direction from nearest town or city: 17E, 2 1/2 N of Street address of well location if in city: Scott City, Kansas			3. Owner of well: Sharp Farms R.R. or street: City, state, zip code: Healy, KS 67850			
4. Locate with "X" in section below:		Sketch map: <div style="border: 1px solid black; padding: 5px; display: inline-block;">Septic</div> ↑ 3/4 mi. X well		6. Bore hole dia. <u>26</u> in. Completion date _____ Well depth <u>130</u> ft. <u>3-5-77</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 _____ Welded <input checked="" type="checkbox"/> Surface <u>10</u> in. RMP _____ PVC _____ Weight <u>31.67</u> lbs./ft. Dia. <u>16</u> in. to <u>130</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>188</u>		10. Screen: Manufacturer's name _____ Johnson Type <u>Galv. Steel</u> Dia. <u>16 in.</u> Slot/gauge <u>.100</u> Length <u>30 ft.</u> Set between <u>100</u> ft. and <u>130</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> <u>yes</u> Size range of material <u>3/4-1/4</u> ft.		
5. Type and color of material		From	To	11. Static water level: _____ mo./day/yr. <u>80</u> ft. below land surface Date <u>12-8-76</u>		
Clay		0	20	12. Pumping level below land surfaces: <u>104</u> ft. after <u>4</u> hrs. pumping <u>370</u> g.p.m. <u>111</u> ft. after <u>4</u> hrs. pumping <u>415</u> g.p.m. Estimated maximum yield <u>415</u> g.p.m.		
Gyp		20	30	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
Gyp		30	39	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade		
Fine sd clay		39	46	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.		
Sd rock		46	50	16. Nearest source of possible contamination: ft. <u>3960</u> Direction <u>North</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Fine sd		50	63	17. Pump: _____ Not installed Manufacturer's name <u>Western Land Roller</u> Model number _____ HP _____ Volts _____ Length of drop pipe <u>120</u> ft. capacity <u>415</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		
Sd rock		63	78	(Use a second sheet if needed)		
Sd coarse		78	108			
Sd 'tight'		108	110	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>[Signature]</u> Authorized Representative <u>3-29-77</u>		
Sd coarse		110	120	18. Elevation:		
Clay yellow		120	133	19. Remarks:		
Shale		133	135	Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		

T 18
 R 30
 Sec 1
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 1/4

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

Form WWC-5