

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 NW 1/4 | Section number 16 | Township number T 18 S R 32 E/W | Range number |
| 2. Distance and direction from nearest town or city: 1N, 2 3/4 E Street address of well location if in city: of Scott City, KS | | | | 3. Owner of well: C. A. Steele & Sons R.R. or street: 713 Main City, state, zip code: Scott City, KS 67871 | | |
| 4. Locate with "X" in section below: | | Sketch map: | | 6. Bore hole dia. <u>26</u> in. Completion date _____ Well depth <u>145</u> ft. <u>7-2-75</u> | | |
| | | | | 7. 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 | | |
| 5. Type and color of material | | From | To | 8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> <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 | | |
| Clay | | 0 | 25 | 9. Casing: Material <u>Steel</u> Height: Above 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>145</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>188</u> | | |
| Gyp | | 25 | 30 | 10. Screen: Manufacturer's name <u>Free Flow & Johnson</u> Type <u>Galv. & Prime Steel</u> Dia. <u>16 in.</u> Slot/gauze <u>100 & 125</u> Length <u>40 ft.</u> Set between <u>105</u> ft. and <u>145</u> ft. _____ ft. and _____ ft. | | |
| Clay | | 30 | 45 | Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>3/4 - #</u> | | |
| Sd rock | | 45 | 61 | 11. Static water level: _____ mo./day/yr. <u>96</u> ft. below land surface Date <u>5-5-75</u> | | |
| Sd med | | 61 | 64 | 12. Pumping level below land surfaces: <u>120</u> ft. after <u>4</u> hrs. pumping <u>210</u> g.p.m. <u>128</u> ft. after <u>4</u> hrs. pumping <u>320</u> g.p.m. Estimated maximum yield <u>320</u> g.p.m. | | |
| Sd rock | | 64 | 89 | 13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____ | | |
| Fine sd clay | | 89 | 94 | 14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade | | |
| Sd rock | | 94 | 97 | <input checked="" type="checkbox"/> Well grouted? _____ Wth: <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. | | |
| Fine sd | | 97 | 104 | 16. Nearest source of possible contamination: ft. <u>2640</u> Direction <u>SW</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Sd coarse | | 108 | 123 | 17. Pump: _____ Not installed Manufacturer's name <u>Western Land Roller</u> Model number <u>GE</u> HP <u>25</u> Volts <u>480</u> Length of drop pipe <u>135</u> ft. capacity <u>320</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 | | 123 | 143 | | | |
| Yellow | | 143 | 160 | | | |
| Shale | | 160 | | | | |
| (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. Weishaar Drilling 232 Business name _____ License No. _____ Address <u>Scott City, KS 67871</u> Signed <u>[Signature]</u> Date _____ Authorized representative <u>7-20-76</u> | | |
| 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 WW-C-5

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