

LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: <u>Scott</u>	<u>SE 1/4 SE 1/4 SE 1/4</u>	<u>17</u>	<u>T 18 S</u>	<u>R 32 E/W</u>

Distance and direction from nearest town or city? 1.5 East of Scott Street address of well if located within city?

WATER WELL OWNER: ROY BERRY
 RR#, St. Address, Box #: RFD 1
 City, State, ZIP Code: Scott City, Ks. 67871

DEPTH OF COMPLETED WELL: 165 ft. Bore Hole Diameter: 9 in. to 165 ft. and _____ in. to _____ ft.

Well Water to be used as:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
9 Dewatering	10 Observation well	12 Other (Specify below)

Well's static water level: 110 ft. below land surface measured on _____ month _____ day _____ year

Pump Test Data: Well water was _____ ft. after _____ hours pumping. _____ gpm

Est. Yield: 200 gpm: Well water was _____ ft. after _____ hours pumping. _____ gpm

TYPE OF BLANK CASING USED:

5 Wrought iron	8 Concrete tile	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement
2 PVC	4 ABS	7 Fiberglass
9 Other (specify below)	_____	_____

Blank casing dia: 5 in. to 145 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 333

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify) _____
12 None used (open hole)	_____	_____	_____	_____

Screen or Perforation Openings Are:

5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped
2 Louvered shutter	4 Key punched	7 Torch cut
10 Other (specify) _____	_____	_____

Screen-Perforation Dia: 5 in. to 165 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Screen-Perforated Intervals: From 145 ft. to 165 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

Gravel Pack Intervals: From 15 ft. to 165 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grouted Intervals: From 5 ft. to 15 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well
2 Sewer lines	5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well
3 Lateral lines	6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)
_____	_____	_____	13 Watertight sewer lines	_____

Direction from well: North How many feet: 300 ? Water Well Disinfected? Yes No

Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes No

If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____

Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on Aug month 1 day 1977 year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 256

This Water Well Record was completed on _____ month 30 day 80 year under the business name of Whinery Drilling & Pipe Scott City, Ks. by (signature)

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	10	soil	150	155	Coarse sand
	10	25	clay	155	160	yellow
	25	42	sandy clay	160	165	Blue Shale
	42	83	clay			
	83	118	sandy clay			
	118	120	sand			
	120	122	clay			
	122	130	sand + 2 streaks of clay			
	130	140	clay			
	140	150	Fair sand			

ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, please press firmly and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.