

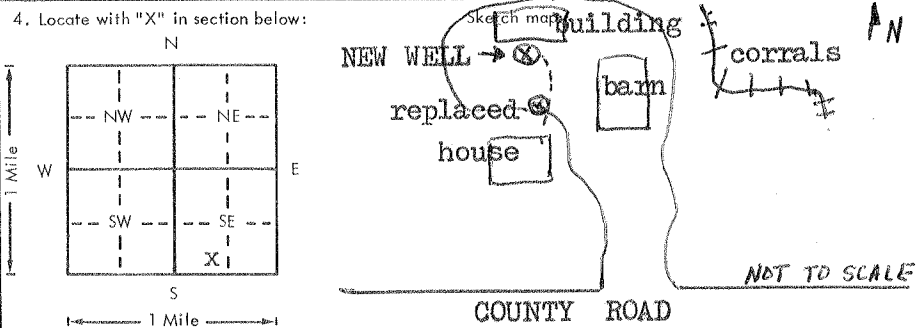
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

SCOTT CITY

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

BCS

1. Location of well: Scott		Fraction se 1/4 SW 1/4 se 1/4		Section number 11		Township number T 18 S R 33		Range number 33	
2. Distance and direction from nearest town or city: 1 mile North, & 1 1/2 mile West of Scott City Street address of well location if in city:					3. Owner of well: Estate of H.D. Parkinson, c/o Elma Parkinson, 501 College St. Scott City, KS 67871				
4. Locate with "X" in section below: 					6. Bore hole dia. 12 in. Completion date 10-30-78 Well depth 193 ft.				
5. Type and color of material					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				
Dirt & clay					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				
Sandy clay					9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded _____ Surface 5 ft RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft.				
Gyp with clay streaks					Dia. 6 in. to 15 1/4 ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. 316				
Medium sand					10. Screen: Manufacturer's name Peerless Plastics Type PVC Dia. 6" Slot/gauze 040 Length 40 ft Set between 154 ft. and 193 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8" down				
Hard gyp with clay streaks					11. Static water level: _____ mo./day/yr. 118 ft. below land surface Date 10-29-78				
Medium sand					12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 80+ g.p.m.				
Yellow clay					13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____				
Blue shale					14. Well head completion: <input checked="" type="checkbox"/> Pitless cap <input type="checkbox"/> _____ unit 12 Inches above grade				
BROOK 190'					15. Well grouted? <input checked="" type="checkbox"/> yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 5 ft. to 15 ft.				
					16. Nearest source of possible contamination: ft. 75 Direction east Type corrals Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
					17. Pump: _____ Not installed Manufacturer's name Aermotor Model number SE50 HP 5 Volts 230 Length of drop pipe 168 ft. capacity 50 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				
18. Elevation: Topography: _____ Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland _____ Valley					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. ABC Drilling, Inc. 246 Business name _____ License No. _____ Address Scott City, KS 67871 Signed Sylvia H. Bass Date 11/6/78 Authorized representative				
19. Remarks: Replacement for well drilled in 1958 to 123 ft. Old well filled with concrete to within 4 ft of surface. Old pit filled in. Even older well also filled with concrete bottom to top. 2976 (TOP)									

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

Form WWC-5