

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 SW 1/4	Section number 14	Township number T 18 S R 33 E	Range number 33
2. Distance and direction from nearest town or city: 2W, 1/2N, 1/2S of Street address of well location if in city: Scott City, Kansas			3. Owner of well: Luke & Son R.R. or street: 901 Crescent 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>159</u> ft. <u>7-31-77</u>	
					7. ___ Cable tool ___ Rotary ___ Driven ___ Dug ___ Hollow rod ___ Jetted ___ Bored <input checked="" type="checkbox"/> Reverse rotary	
5. Type and color of material					8. Use: ___ Domestic ___ Public supply ___ Industry <input checked="" type="checkbox"/> Irrigation ___ Air conditioning ___ Stock ___ Lawn ___ Oil field water ___ 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>159</u> ft. depth Wall Thickness: inches or Dia. ___ in. to ___ ft. depth gage No. <u>188</u>	
					10. Screen: Manufacturer's name _____ Free Flow Type <u>Prime Steel</u> Dia. <u>16 in.</u> <input checked="" type="checkbox"/> gauze <u>125</u> Length <u>40 ft.</u> Set between <u>119</u> ft. and <u>159</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> <u>yes</u> Size range of material <u>5/8-1/4</u>	
					11. Static water level: _____ mo./day/yr. <u>85</u> ft. below land surface Date <u>11-18-76</u>	
					12. Pumping level below land surfaces: <u>110</u> ft. after <u>4</u> hrs. pumping <u>1050</u> g.p.m. <u>120</u> ft. after <u>4</u> hrs. pumping <u>1400</u> g.p.m. Estimated maximum yield <u>1400</u> g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. ___ Yes <input checked="" type="checkbox"/> No Date _____	
					14. Well head completion: ___ Pitless adapter _____ inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement ___ Bentonite ___ Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
					16. Nearest source of possible contamination: ft. <u>2640</u> Direction <u>West</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ___ No	
					17. Pump: ___ Not installed Manufacturer's name <u>Wintroath</u> Model number _____ HP _____ Volts _____ Length of drop pipe <u>150</u> ft. capacity <u>1400</u> g.p.m. Type: ___ Submersible <input checked="" type="checkbox"/> Turbine ___ Jet ___ Reciprocating ___ Centrifugal ___ Other	
					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 <u>232</u> Business name _____ License No. _____ Address <u>Scott City, KS 67871</u> Signed <u>[Signature]</u> Date <u>8-18-77</u> Authorized representative	
18. Elevation:		19. Remarks:				
Topography: ___ Hill ___ Slope <input checked="" type="checkbox"/> Upland ___ Valley		(Use a second sheet if needed)				

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 R 33
 E
 Sec 14
 1/4 1/4 1/4
 NENESU

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

Form WWC-5