

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 <b>Scott</b>	Fraction <b>NW 1/4 NE 1/4 SE 1/4</b>	Section number <b>25</b>	Township number <b>T 18 S R 33</b>	Range number <b>33</b>
2. Distance and direction from nearest town or city: <b>1S, 1/4W of</b>			3. Owner of well: <b>Loren Henderson</b>			
Street address of well location if in city: <b>Scott City, KS</b>			R.R. or street: <b>Box 219</b>			
			City, state, zip code: <b>Scott City, KS 67871</b>			
4. Locate with "X" in section below:			Sketch map:		6. Bore hole dia. <b>24</b> in. Completion date _____ Well depth <b>145</b> ft. <b>3-30-76</b>	
					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	
5. Type and color of material			From	To	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	
Clay			0	22	9. Casing: Material <b>Steel</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>10</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>17.5</b> lbs./ft. Dia. <b>12</b> in. to <b>145</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>134</b>	
Sd coarse			22	42	10. Screen: Manufacturer's name _____ <b>Free Flow</b> Type <b>Prime Steel</b> Dia. <b>12 in.</b> <input checked="" type="checkbox"/> gauze <b>.179</b> Length <b>66</b> Set between <b>79</b> ft. and <b>145</b> ft. _____ ft. and _____ ft. Gravel pack? <b>yes</b> Size range of material <b>3/4-1</b>	
Clay			42	54	11. Static water level: _____ mo./day/yr. <b>70</b> ft. below land surface Date <b>3-6-76</b>	
Sd coarse			54	88	12. Pumping level below land surfaces: <b>80</b> ft. after <b>8</b> hrs. pumping <b>450</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>450</b> g.p.m.	
Clay			88	100	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
Gyp			100	103	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade	
Clay			103	104	15. Well grouted? <input type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>70</b> ft.	
Sd rock			103	104	16. Nearest source of possible contamination: ft. <b>2640</b> Direction <b>W</b> Type <b>Septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Clay			104	117	17. Pump: _____ Not installed Manufacturer's name <b>Simmons</b> Model number _____ HP _____ Volts _____ Length of drop pipe <b>120</b> ft. capacity <b>450</b> 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	
Gyp			117	120	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. <b>Weishaar Drilling 232</b> Business name _____ License No. _____ Address <b>Scott City, KS 67871</b> Signature <b>Loren Henderson</b> Date <b>7-21-76</b> Authorized Representative	
Clay Gyp str.			120	136		
Fine sd clay			136	145		
Sd rock			145	150		
Clay sdy			150	171		
Gyp T			171	180		
Clay yellow (Use a second sheet if needed)			180	220		
18. Elevation:		19. Remarks: <b>Shale</b>		220		
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 WWC-5