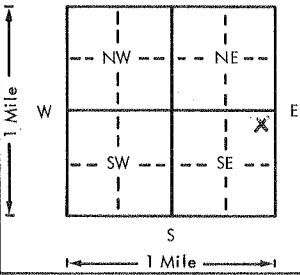


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 SE 1/4	Section number 25	Township number T 18 S	Range number R 33 E/W
2. Distance and direction from nearest town or city: 1 S Street address of well location if in city: Scott City, Ks			3. Owner of well: LAKE Construction R.R. or street: Scott City, Ks. 67871 City, state, zip code:		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. 8 in. Completion date 5-1-75 Well depth 185 ft.	
5. Type and color of material		From To		7. <input 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	
				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	
top soil		0 10		9. Casing: Material _____ Height: Above or below Threaded _____ Welded <u>Glue</u> Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>165</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>333</u>	
				10. Screen: Manufacturer's name W.A. BROWN Type _____ Dia. <u>5</u> Slot/gauze _____ Length <u>20</u> Set between <u>165</u> ft. and <u>185</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>1/8 - 1/4</u>	
clay		10 35		11. Static water level: _____ mo./day/yr. <u>115</u> ft. below land surface Date <u>5-1-75</u>	
white gyp.		35 62		12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>250</u> g.p.m.	
brown clay		62 120		13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
SAND		120 136		14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
sandy clay		136 148		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 <u>5</u> ft. to <u>15</u> ft.	
sand		148 150		16. Nearest source of possible contamination: ft. <u>150</u> Direction <u>E</u> Type <u>Fuel Tank</u>	
sand		150 161		Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
clay		161 165		17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
clay		165 171		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. Whinery Drilling <u>256</u> Business name License No. Address <u>405 Antkoff, Scott City, Ks</u> Signed <u>John Whinery</u> Date <u>7-24-80</u> Authorized representative	
Fine sand		171 180			
yellow		180 185		18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	
Blue Shale		185			
(Use a second sheet if needed)				19. Remarks:	

T 18 S 33 E 25 NE 1/4 SE 1/4

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

Form WWC-5