

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 NW 1/4 NE 1/4</b>	Section number <b>13</b>	Township number <b>T 18 S R 34 E 10</b>	Range number
2. Distance and direction from nearest town or city: <b>SW, 1N, 1 1/2 W</b> Street address of well location if in city: <b>of Scott City, KS</b>				3. Owner of well: <b>M. O. Nuss</b> R.R. or street: City, state, zip code: <b>Great Bend, KS 67530</b>		
4. Locate with "X" in section below: N W E S 1 Mile Sketch map: 				6. Bore hole dia. <b>26</b> in. Completion date _____ Well depth <b>145</b> ft. <b>7-1-75</b>		
5. Type and color of material				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		
				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		
From To				9. Casing: Material <b>Steel</b> Height: <del>Above</del> or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <b>10</b> in. RMP _____ PVC _____ Weight <b>31.67</b> lbs./ft. Dia. <b>16</b> in. to <b>145</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>188</b>		
				10. Screen: Manufacturer's name <b>Free Flow</b> Type <b>Prime Steel</b> Dia. <b>16 in.</b> <input checked="" type="checkbox"/> gauze <b>.125</b> Length <b>30 ft.</b> Set between <b>115</b> ft. and <b>145</b> ft. _____ ft. and _____ ft. Gravel pack? <b>Yes</b> Size range of material <b>3/4-#</b>		
Clay				0	20	11. Static water level: <b>106</b> ft. below land surface Date <b>4-26-76</b> mo./day/yr.
Gyp				20	29	12. Pumping level below land surfaces: <b>124</b> ft. after <b>4</b> hrs. pumping <b>270</b> g.p.m. <b>127</b> ft. after <b>4</b> hrs. pumping <b>305</b> g.p.m. Estimated maximum yield <b>305</b> g.p.m.
Clay				29	33	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____
Sd rock				33	41	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade
Fine sd clay				41	57	<input checked="" type="checkbox"/> Well grouted? _____ With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.
Sd coarse				57	70	16. Nearest source of possible contamination: ft. <b>2640</b> Direction <b>E</b> Type <b>Septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____
Fine sd clay				70	77	17. Pump: _____ Not installed Manufacturer's name <b>Western Land Roller</b> Model number <b>CS</b> HP <b>20</b> Volts <b>230</b> Length of drop pipe <b>135</b> ft. capacity <b>305</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
Sd rock				77	81	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</b> <b>232</b> Business name License No. Address <b>Scott City, KS 67871</b> Signature _____ Date _____ Authorized representative <b>7-20-76</b>
Fine sd clay				81	100	
Fine sd				100	112	18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley
Med sd				112	126	
Sd coarse				126	135	19. Remarks: 
Clay yellow				135	142	
Shale				142	145	(Use a second sheet if needed)

18 34 10 13 1/4 1/4 1/4

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

Form WWC-5