

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 Wichita	Fraction NW 1/4 NE 1/4 NE 1/4	Section number 8	Township number T 18 S R 36 E/W	Range number 36
2. Distance and direction from nearest town or city: 22W, 2N, 1/4 W of Street address of well location if in city: Scott City, KS			3. Owner of well: Jerome Ridder R.R. or street: Box 333 City, state, zip code: Leoti, KS 67861			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>26</u> in. Completion date _____ Well depth <u>192</u> ft. <u>1-31-76</u>		
				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	26	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>192</u> ft. depth Wall Thickness _____ inches or Dia. _____ in. to _____ ft. depth gage No. <u>.188</u>		
Gyp		26	40	10. Screen: Manufacturer's name _____ Johnson Type <u>Galv. Steel</u> Dia. <u>16 in.</u> Slot/gauze <u>.100</u> Length <u>20 ft.</u> Set between <u>172</u> ft. and <u>192</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material. <u>3/4-1/2</u>		
Rock H		40	43	11. Static water level: _____ mo./day/yr. <u>126</u> ft. below land surface Date <u>1-10-76</u>		
Gyp		43	62	12. Pumping level below land surfaces: <u>179</u> ft. after <u>4</u> hrs. pumping <u>700</u> g.p.m. <u>183</u> ft. after <u>4</u> hrs. pumping <u>730</u> g.p.m. Estimated maximum yield <u>730</u> g.p.m.		
Fine sd clay		62	81	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
Sd coarse		81	101	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade		
Sd rock		101	104	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>12</u> ft.		
Sd coarse		104	107	16. Nearest source of possible contamination: ft. <u>2640</u> Direction <u>SE</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Sd rock		107	110	17. Pump: _____ Not installed Manufacturer's name <u>Western Land Roller</u> Model number <u>GE</u> HP <u>50</u> Volts <u>160</u> Length of drop pipe <u>180</u> ft. capacity <u>730</u> 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		
Fine sd clay		110	145	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. Weisharr Drilling <u>232</u> Business name _____ License No. _____ Address <u>Scott City, KS 67871</u> Signature _____ Date <u>7-20-76</u> Authorized representative _____		
Sd coarse		145	152			
Clay		152	160			
Clay		160	171			
Sd coarse		171	189			
Clay yellow		189	195			
Shale (Use a second sheet if needed)		195				
18. Elevation:	19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

18 360 W 8 N 1/4 1/4 1/4

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

Form WWC-5