

WATER WELL RECORD KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors)

		F			Topeka, Kansas 6662U)	
•	County	Fraction SW	Se		number	Township number		Range number	
1. Location of well:	Shawnee	1/4 SE 1/4 SE	1/4	,	5	1 10	0	R 13	© w
2. Distance and direc	ction from nearest town or city:			er of well	: ma	RUIN PAL		· · · · · · · · · · · · · · · · · · ·	
D. P. or street.							_	110	
Street address of well location if in city: Rossuille City, state, zip code: R						ossville	RFC	50.66	533
4. Locate with "X" i	n section below:	Sketch map:				6. Bore hole dia.	Sin.	Completion dat	e
N		well				Well depth			
		χ				7able tool			
NW	NE	î.				Hollow rod			
₩ ₩ 1		180				8. Use: Domesti			
E W						Irrigation Air conditioning Stock Lawn Oil field water Other			
sw	SE	DEALMAGE DISC				9. Casing: Material			
]						Threaded Weld	ed	Surface	36in.
S						RMPPVC	92	Weight	15 lbs./ft. 2,8
1 → 1 M	ile ————————————————————————————————————			т		Dia. <u>5</u> in. to 4	ft. dept	h Wall Thicknes	s: inches or
5. Type and color of	material			From	То	Dia in. to			
						10. Screen: Manufa			
Top	SOIL			0	5	Type PUL		Dia	
						(Slo)/gauze .0 2	C	Length	0
Clay,	Sandy			5	18	Set between			<u>2</u> ft.
Fine SA	and course sand	WATER BEARIN	9	18	29	Gravel pack?			<u>030×060</u>
			•			11. Static water leve			mo./day/yr.
Shale,	GREY			24	40	ft. below	land surf	ace Date <u>/2 -</u>	12-78
	-					12. Pumping level be			
						ft. after _			
						ft. after _ Estimated maximum y			g.p.m.
						13. Water sample sul			mo./day/yr.
				 		Yes		ate	
						14. Well head compl	etion: C	4P	
						Pitless adapter		Inches ab	oove grade
				 		15. Well grouted? _			-
						With: Neat cer			Concrete
				<u> </u>		16. Negrest source of	t possible tion <u>گ</u>	contamination:	PAINAPP
						Well disinfected upo			
						17. Pump:		Not instal	led · 🎜
		I A RELIEF CONTROL OF THE STREET				Manufacturer's name			<u> </u>
						Model number Length of drop pipe			Volts
				_	<u> </u>	Length of drop pipe Type:	1.5.0	н. сарасту <u> </u>	
						Submersible		Tu	rbine
	We water and water if needed) (Use a second sheet if needed) 19. Romarks: 19. Romar					Jet			ciprocating 5
		I sheet if needed)		<u></u>		Centrifugal			ther 🧗 [C
18. Elevation:	19. Remarks:					20. Water well cont This well was drilled			L this report
1 462	VAD many -							-	
Topography: OWNER TO INSTAIL SIAD						is true to the best of my knowledge and belief.			
Hill						Business name		1	License No.
Slope						Address Address	1	} >	-
Upland						Signed Autho		esentative /	Date = 78 5
Valley									~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~

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

BR= 938

¥ = 952

Form WWC-5