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

WATER WELL RECORD KSA 82a-1201-1215

CBC

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

Township number Range number 1. Location of well: Shawnee 27 10 16 E/W 3. Owner of well: Bow ser, Distance and direction from nearest town or city: Robert N.E. Meriden Rd. eet address of well location if in city: City, state, zip code: in. Completion date 3/23/ 4. Locate with "X" in section below: Sketch map: Well depth 40 ft. Ν 7. X Cable tool __ Rotary __ Driven __ Dug ____Bored ___ Reverse rotary _ Hollow rod ___ Jetted NW -NE -8. Use: X Domestic Public supply Industry Mile __ Irrigation __ Air conditioning __ Stock Oil field water . Casing: Material Steeleight: Above or below ___ Welded X___iSurface _ 30 Weight 13__lbs./ft. ____ PVC _____ Dia Lin. to ft. depth Wall Thickness: inches or 1 Mile Dia. ___ in. to ____ ft. depth gage No.188 5. Type and color of material 10. Screen: Manufacturer's name Steel and Supply Company Top Soul 0 Type __Steel ___ Dia._ Slot/gauze in hole Length Black Clay with Sand Set between __ Yellow Clay with Sand 12 Gravel pack? Ye SSize range of material_ 11. Static water level: 18 Yellow Clay with Coarse (Sand) Gravel 7 st. below land surface Date 3 12. Pumping level below land surfaces: 20 Gravel and Sand 9 ft. after ____3 hrs. pumping ____ ft. after _ _ hrs. pumping 26 Gray Shale Estimated maximum yield _____10 _g.p.m. Lime Rock 33 13. Water sample submitted: mo./day/yr. Yes <u>Y</u> No Date 35 Blue Shale 14. Well head completion: Y Pitless adapter Inches above grade 15. Well grouted? Yes With: X Neat cement _ 16. Negrest source of possible contamination:
ft. 100 Marcetion N. W. Type Septi Well disinfected upon completion? _____Y__ Yes Not installed Manufacturer's name Gould Pump Model number 7EH HP Length of drop pipe __35__ ft. capacity _10g.p.m. Type: X Submersible Turbine ____ Jet Reciprocating Other (Use a second sheet if needed) Centrifugal 18. Elevation: 19. Remarks: 20. Water well contractor's certification: Slab to be installed by customer. This well was drilled under my jurisdiction and this report He knows this is a regulation. Topography: _ Hill Slope X_Upland Forward the white, blue and pink copies to the Department of Health and Environment Form WWC-5