USE TYPEWRITER OR BALL ACC POINT PEN-PRESS FIRMLY. PRINT CLEARLY. WATER WELL RECORD Kansas State Dept. Of Health KSA 82a-1201-1215 (Water Well Contractors) Forbes-Bldg. 740 Topeka, Kansas 66620 SW SW NE Township name Fraction Section number Town number Range number TRACT 1 Location of well: S生-NE Distance and direction from nearest town or city NW 35 Street address of well location if in city: TopeKA, KS. Address: TOPERA KANS 19 ft. Date of completion Locate with "X" in section below: Sketch map: 4 Well depth: .. Well diameter 10 in. 4-29-75 5 Cable tool X Rotary Driven Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary 6 Use: Domestic Public supply Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial 75% ☐ Test well ☐ 7 Casing: Material Mc Height: above/below Threaded Welded Surface 24 in. in. to 8# ft. depth Drive shoe? Yes X No -1 Mile in. to ____ft. depth 2 Type and color of material From 8 Screen: Manufacturer Slot/gauze. Set between 29 ft. and 49 Fittings: Gravel pack Yes No Size range of material 9 Static water level: NoT Mensured ____ft. below land surface Date . 10 Pumping level below land surfaces: AiR TesT __ ft. after ____ hrs. pumping __ __ ft. after ___ __hrs. pumping _ Estimated maximum yield 10 g.p.m. 60 11 Water sample submitted: Yes No Date.

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

BR =900

Slope

Upland

Valley

(use a second sheet if needed)

Form WWC-5

12 Well head completion:

Near cement Bentonite Depth: From ft. to ft.

14 Nearest source of possible contamination:

15 Ty

Well disinfected upon completion? Yes

Manufacturer's name Jacuzzi

Model number 5548 HP 2 Volts 20
Length of drop pipe 25 ft. capacity (Q g.m.p.

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Authorized representative

Pitless adapter

13 Well grouted? X Yes

Submersible

Certrifugal

17 Water well contractor's certification:

Signed Dala Rafine

☐ Jet

CAPP≪4' 24 □ Inches above grade

☐ Turbine

Other

Reciprocating

☐ No

Form WWC-5