Kansas Department of Health and Environment-Division of Environment

A

(Water well Contractors)

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| Lot 5-6-7 | 06 | cki | 7 Tapeka, Kansas 66620 |
|---|------------|------------|--|
| 1. Location of well: County Fraction SW | Section | number | Township number Range number |
| 2. Distance and direction from nearest town or city: Well Leafen in 3. Own | ner of wel | 1 : Da | rry/ Pickens |
| Street address of well location if in city: | street: | Rt | -1 Bex 1161 |
| 4. Locate with "X" in section below: Sketch map: | | code: | 6. Bore hole dia. 65 in. Completion date 4-25-17 |
| | | | Well depth 63_ft. |
| 1 - NW NE - 1 7 2 27 M7 11 29 | | | 7. 🔏 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary |
| \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | 8. Use: X Domestic Public supply Industry |
| - { | | | Irrigation Air conditioning Stock Lawn Oil field water Other |
| sw se s | | | 9. Casing: Material PIFS Height: Above of Beld |
| | | | Threaded Welded in. RMP PVC Weight lbs./ft. |
| 1 Mile ———————————————————————————————————— | | ı | Dia. Sin. to 63 ft. depth Wall Thickness: inches or |
| 5. Type and color of material | From | То | Dia in. to ft. depth gage No |
| Top Soil | 0 | 5 | Type RM P Dia. 5" |
| Loren Chu | - | 17 | Slot/gauze Length |
| Chi de de | 10 | 10 | Set betweenft. andft. |
| Llay sandy in spots | 17 | 30 | Gravel pack? Size range of material |
| Sand dirty med | 50 | 57 | 30 ft. below land surface Date 4-25-77 |
| Sand med-cherse | 57 | 63 | 12. Pumping level below land surfaces: ft. after hrs. pumping g.p.m. |
| | | | ft. after hrs. pumping g.p.m. Estimated maximum yield |
| | | | 13. Water sample submitted: mo./day/yr. |
| | | | Yes No Date |
| | | | Pitless adapter Inches above grade |
| | | | 15. Well grouted? YES With: Neat cement Bentonite Concrete |
| | | | Depth: From ft. to ft. |
| | | | 16. Nearest source of possible contamination: ft |
| | | | Well disinfected upon completion? Yes No |
| | | | 17. Pump: Manufacturer's name Manufacturer's name |
| | | | Model number HP Volts |
| | | | Length of drop pipe ft. capacityg.p.m. Type: |
| | | | Submersible Turbine Reciprocating |
| (Use a second sheet if needed) | | | Centrifugal Other |
| 18. Elevation: 19. Remarks: 854 Super to install slab | | | 20. Water well contractor's certification: This well was drilled under my jurisdiction and this report |
| Topography: | | | is true to the best of my knowledge and belief. |
| — Hill | | | Business name Page 18 Cicense No. |
| Slope Upland | | | Address Robert Pate 1-1917 |
| Valley | | | Signed Authorized representative Date |
| Forward the white, blue and pink copies to the Department of Health and Environment | | | Form WWC-5 |
| Bl ela < 787 | | | V_{i} |
| (Z = 82X) | | | M1-1023 |