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

	I c	15	Τ.				
1. Location of well:	County	Fraction		ction n	umber	Township number Range number	
	Dickinson	NE 1/4 NW 1/4 NE		6		T 13 S R 2 (E)W	
					Leonard Bennett Abilene, Kamsas 67410		
4. Locate with "X" in section below: Sketch map:				·		6. Bore hole dia. 8 in. Completion date Well depth 55 ft. 5/2/78	
X-WELL						7 Cable tool X Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary 8. Use: X Domestic Public supply Industry	
— SW — —	NW NE NE NE SE					Irrigation Air conditioning Stock Lawn Oil field water Other 9. Casing: MaterialDlst Height: Above or ****	
S				ل		Threoded	
5. Type and color of			F	rom	То	Dia. 5 in. to 55 ft. depth Wall Thickness: inches or Dia. in. to ft. depth gage No. 0.258	
	Top soil			0	2	10. Screen: Manufacturer's name Western Plastics Type RMP Dia 5"	
	Brown clay			2	11	Slot/gauze 3/32 Length 30 Set between 25 ft. and 55 ft.	
	Sandy clay			11	15	ft. andft. Gravel pack? Yes Size range of material 1/16to3	
	Rock - loss of c	irculation		15		11. Static water level: mg./day/yr25ft. below land surface Date _5/2/78	
			`			12. Pumping level below land surfaces: ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m. 13. Water sample submitted: mo./day/yr.	
						Yes X No Date 14. Well head completion: Pitless adapter 18 Inches above grade	
						15. Well grouted?	
		•				16. Nearest source of possible contamination: ft Direction Type	
						17. Pump: Not installed Manufacturer's name Myers Model number HP 1/2 Volts230	
						Length of drop pipeg.p.m. Type:	
(Use a second sheet if needed)							
18. Elevation: Topography: Hill Slope Upland	19 . Remarks:					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. Rader Drilling Co. 194 Business name Address Carlton, Kansas 67429 Signed Brook LKAL. Date 8-10-18	

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

Form WWC-5