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

WATER WELL RECORD KSA 82a-1201-1215

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T	₹	EW	sec	1/4	1/4	1/4	No.

Kansas State Dept. Of Health (Water Well Contractors) Forbes-Bldg. 740 Topeka, Kansas 66620

Country Coun				1. 1. 1.	1100				Forbes-Bldg. 740 Topeka, Kansas 66620	
those and direction from needs hown or city. If M N P Cadgle 3 Owner of wells. Address: Q D P r cl q	1 Location of well-	l`	Township name	Fraction	-	n number		_		
Address: Cg be rid &		Usage			/	<u>/y</u>	_,			
Search and the service of the serv	Distance and directi	ion from nearest town or cit	"Ifm NA	f Gdale 3 Own	er of well	R_{i}	sber	, ,	7.7.	
Well diameter in. Well diameter in. S Cabbe tool Story Driven Drug Reverse rotory				Add	ress:	91			K5	
Intelligence Inte	Locate with "X" in s		Sketch map:	New 15			4 Well Well	depth: 140 ft diameter 5 in	Date of completion	
Solve Donneste Public supply Industry Infigration Air conditioning Commercial Test well Confidence Air Infigration Air conditioning Commercial Test well Air Infigration Air conditioning Commercial Test well Air Infigration Air conditioning Commercial Test well Air Infigration Air conditioning Commercial Air conditioning Air conditioning Commercial Air conditioning Air cond	[:	1 () 1 1 1 †- 1 1	0 19 15				_	== .	= =	
Tent well Tent well To Carling Marries State S		1	1	1				Domestic Pu	blic supply Industry	
Type and color of material Type and color of material From To Screen: Clay Yellaw O 12 Ime Water D 25 Soreen: Mandicturer Fitting: Shale GARY SA 49 So 50 Popping level look of material Shale GARY SA 49 So 50 Popping level look of material Shale GARY So 50 Popping level look of material Shale GARY So 50 Shale Sandy Shale	w	·; } }; [[]	 -	1x						
Type and color of material Type Sprace Type Sprac				(^						
Type and color of moterial From To In to		· 1					0:		Weight lbs /ft	
Clay	2		Carbon	ng re	From	To		in. toft. dep	th Prive shoe? Yes No	
Type Shreed Dia. Type Shreed Dia. Dialogh Dialogh		7,1	/ //				Man	ufacturer	e ld	
Shale Grey 38 49 Shale Grey 49 50 Shale Grey 59 29 Static water level: Shale Grey 59 29 Static water level: Shale Grey 59 30 50 10 Pumping level below land surface Date 50 11 11 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 10 Pumping level below land surface Date 50 12 12 12 12 12 12 12 12 12 12 12 12 12		Clay y	e/10W		0		Type	Skyrene	_ Dia	
Shale Grey Square 49 50 9 Static water level; 20 10 20 20 20 20 20 20		1 me	<u>Natei</u>		12	28	Set b	etween 200 ft. o	and 140 ft	
Shale Grey Sandy So So So 10 Pumping level below land surfaces Date 20 11 Pumping level below land surfaces. The street has pumping g.p.m. ft. after has pumping		Shale G	rey		28	79			No Size range of material —	
ft. ofter hrs. pumping g.p.m. g		line	GAUL	,	49	50		•	face Date Sept //	
Shale Sandy 62 72 11 Well and the substitute 2 g.p.m. 11 Water sample submitted: 2 g.p.m. 11 Water sample submitted: 2 g.p.m. 12 Well lined completion: 2 Well mouted? 2 g.p.m. 13 Well grouted? 2 yes No No 2 g.m. No 2 g	کـــــــــــک	Shale GA	ey San	dy	50	53		-		
Shale Sandy 62 72 11 Water sample submitted:	Watt	line b	riken		53	62				
Mell fead completion: Pitless adopter Inches above grade Mell grouted? Yes No Neot cement Bentonite Depth: From		Shale S	andy		62	12	11 Wate	er sample submitted:	′	
Shale dark Grey 94 99 Shale dark Grey 94 99 Not ceremit bentonite bentonit		line	Gray		72	85	12 Well	head completion:		
Shale White Grey 99 100 14 Nearest source of possible contrainmentation: Shale 105 109 120 130 140 150 150		line	white		85	94				
1 Nearest source of possible contamination: Shale		Shale	dark	Grev	94	99	D≱\	Neat cement Ben		
Shale 105 09 Well disinfected upon completion? Yes No 15 Pump: Not installed Monufacturer's name Model number HP Volts Length of drop pipe ft. capacity g.m.p. Type: Submersible Turbine Reciprocating Shale Weaselendstept if needed) GAPU 132 470 Gertrifugal Other Open apply: Well disinfected upon completion? Yes No Monufacturer's name Model number HP Volts Length of drop pipe ft. capacity g.m.p. Type: Submersible Turbine Reciprocating Gertrifugal Other Other Other Other Well disinfected upon completion? Yes No Not installed Monufacturer's name Model number HP Volts Length of drop pipe ft. capacity g.m.p. Submersible Turbine Reciprocating Other Other Other Other Other Water well contractor's certification: This well was drilled under my jurisdiction and this report struct to the best of my knowledge and belief. Address Other Other Slope Other Other Other Open apply: Other Other Open		l'me	Gnev	/	99	105	14 Near	rest source of possible	contagnination:	
Not installed Not installe		Shale			105	104			mpletion? Yes No	
Shafe Cally 12 17 17 18 19 19 19 19 19 19 19		Line in	thite		Ι.	1/2	1 .			
Type: Turbine Sha/r Submersible Turbine Sha/r Submersible Jet Reciprocating Other		Shaki	Cary		112	11.7	l .			
Shale wease and the fireded of the f	/ ()				117	/32	1 —		☐ Turbine	
Remarks: elevation Got Salt 132-140-Pluged Topography: Got to With Neat Coment, This well was drilled under my jurisdiction and this report strue to the best of my knowledge and belief. Hill	CI'I C / B				132	140	. =		=	
Topography: Topography: Topography: With Neat Cement, Business name Business name Date Signed Topography: Topograp	16 Remarks: eleva	tion GA+ Sa	1+ 132	7 21		/	17 Wate	er well contractor's co		
Hill Slope Duner Distall Dad Business name Date D	1033 be	ack to m	with		, ,	t			' '	
Valley Signature Substitute State of the Sta		10	6	11 -1			Busir	*	License Mo.	
Valley		Owner	To inst	all pad.					Date 9/30/9	
ward the white, blue and pink copies to the Kansas State Dent. Of Health.	Valley		-					JANA CON 19	Form WWC-5	