WATER WELL RECORD KSA 82a-1201-1215

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

	County	Fraction		ion number	Township number	Range number	
1. Location of well:	Dickinson	SW 1/4 NW 1/4 N		4_	τ /4 s	R 2	€W.
2. Distance and direc	ction from nearest town or city:	2 South	3. Owner of		eg Alliso	7	
Street address of well	l location if in city:	1000	R.R. or street	,,,,,	bilenek	0.674	10
4. Locate with "X" i		Sketch map:	•		1 /29.41	Completion date .	0-70
	'				Well depth ft. 7. Cable tool Rotary		g
X NW	NE				Hollow rod Jetted	Bored Rev	verse rotary
w l	E				8. Use: Domestic F	Public supply l	
sw	SE				LawnC	oil field water	Other
!	1				9. Casing: Material Type. Threaded Welded		below in.
S 1 → 1 Mi					RMP PVC Dia ft. de	Wei	
. Type and color of		***	Fro	m To	Diain. toft. de	oth gage Nacco	Wall
	<u> </u>				10. Screen: Manufacturer's		
	OP Sail			' (Type Otyrene		5
hime Stone				3	Set between 6 ft. and 6 ft.		
ye,	How clay	a Shal	e 3	10	Gravel pack? Size ro		7 "'
7	ome was	ten	4	041	Static water level:	~ ~ ~	o./day/yr.
Gray Shale				1 6/	12. Pumping level below lar		<u>v - / /</u>
Raticula				170	ft. after		g.p.m. g.p.m.
	111 4		0	10	Estimated maximum yield —		g.p.m.
9	Diater	17 /	. 7	K PO	Water sample submitted: Yes No	Date	o./day/yr.
	Slue + Gr	ay Rock		0 9 <u>0</u>	Well head completion: Pitless adapter	11	
					15. Well grouted?	Inches above	e grade
					With: Neat rement Depth: From ft. ta	107	. Concrete _
					16. Nearest source of possib	e contamination:	ewen
					ft. 65 Direction 4 Well disinfected upon compl		No
2015					17. Pump:	X Nat installed	-
-					Manufacturer's name Model number	HP V	alts
··-·	<u>,</u>				Length of drop pipe Type:	ft. capacity	g.p.m.
	4.1				Submersible	Turbir	ne rocating
		sheet if needed)			Centrifugal	Other	- 1 10
B. Elevation:	19. Remarks: OUN El Slab acro	r Torun C	oner	ete	20. Water well contractor's This well was drilled under n	certification: ny jurisdiction and th	is report
opography:	Slab acro	und well	444	1444	is true to the best of my know	wledge and belief.	220 =
opograpny:					Business name	Vra 10	cense No.
Slope Upland					Address Om T	anthus	\$
Valley					Authorized re	presentative 3	20-25
ward the white, blu	ue and pink copies to the Departmen	t of Health and Enviranment				Form W	WC -5