25

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

EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

CAC

WE SW

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

			2011	-				
	County	Township name	Fraction	Sect	ion number		Town number	Range number
1 Location of well:	Johnson		NE/4	MIN /4 scale	20		14	25E
Distance and directi	on from nearest town or ci	ty:		3 Owner of we		emag	ro	
Street address of we	Il location if in city:			Address:	1913	Kansa	as City,	Missouri 64120
Locate with "X" in s	section below:	Sketch map:				4 Well	depth: 640 1	ft. Date of completion 7–14–
	1 1 1	Sketch map:  bush wate  40-50  25-30  will  e and color of material	r O			$\overline{}$	diameteri able tool Rotary	Driven Dug
		bush was	·	ffset				☐ Bored ☐ Reverse rotary
w	E	40-50	in in	10,	uð.	i		ublic supply Industry ir conditioning Commercial
	1-X	30 9	7PM-1	had "	<i>,</i> ••		Test well	Height: above/below
	1 1 1	25	hel	1 was	1	Threa	ded Welded	Surfacein.
	S Mile	well	gas "	plug)	gedi	Diam	8. to 22ft. dep	Weight   lbs./ft oth!Drive shoe?   Yes   No
2	Тур	e and color of material	Muss	From	То		in. to ft. dep	
		G1 ozz //2	12/2-		00		facturer //o/	
- \- \- \- \- \- \- \- \- \- \- \- \- \-		Clay 10	1/13	0	20		gauze	
		shale		20	25		and ft	
		shale		25	40	Grave	el pack Yes	No Size range of material
		lime		40	42		water level _ ft. below land sur	face Date
		shale		42	52		surfaces: hrs. pumping g.p.m.	
		lime		52	54		hrs. pumping g.p.m.	
		shale		54	55		sample submitted:	<u>VO</u> g.p.m.
		lime		55	64		s No	Date
						☐ Pi	tless adapter	Inches above grade?
	1-7	shale		64	65	1 10 11011	grouted? Yes eat cement Ben	
		lime		65	79	Depth	: From ZZ ft. t	o <u>O</u> ft.
		shale		79	84	1	est source of possible ———— Direction —	Type
		lime		84	103	Well	disinfected upon co	mpletion? Yes
	The his	shale & sl	ate	103	106	Manu	facturer's name	$\overline{}$
		lime		106	124	1	number h of drop pipe	HP Volts ft. capacity g.m.p.
		shale		124	167	Type:	bmersible	Turbine
	luse	a second sheet if needed	i)				et ertrifugal	Reciprocating Other
16 Remarks: elevati	on					17 Water	well contractor's co	ertification:
900	Well back to at 320	drilled	for s	jas, P	lusse	This w		er my jurisdiction and this  f my knowledge and belief.
Topography:	back to	3761.	Pack	er se	1	Busine	S name	12/ License No.
Slope	at 328	1/	(1)			Addre		10
Upland Valley		Comp	U/18	ss a		Signe	Authorized kep	resentative Date 7-30

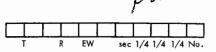
Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

BR = 880

Form WWC-5

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

## WATER WELL RECORD KSA 82a-1201-1215



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

County 1 Location of well:	Township name	Fraction	Sec	ion number	•	Town number	Range number			
Distance and direction from nearest tow	3 Owner of we	Dwner of well:								
Street address of well location if in city	Address:	Address:								
Locate with "X" in section below:			4 Well depth: ft. Date of completion Well diameter in.							
	_				5 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary					
w			6 Use: Domestic Public supply Industry Irrigation Air conditioning Commercial Test well							
1 1					7 Casing: Material Height: above/below Threaded WeldedISurface in.					
S 1 Mile	<u> </u>		· 	<b>—</b>	1	m.	eight lbs./ft ive shoe?			
2	Type and color of material		From	То	8 Scre					
	lime		167	170	Тур	nufacturer Di	a			
	shale		170	200	1	t/gauze Le between ft, and _				
	shale		200	230	1	ings: vel pack 🗌 Yes 🔲 No S	ize range of material —			
	sandy shal	Le	230	240	9 Static water level:ft. below land surface Date					
	shale		240	260	10 Pum	ping level below land surfa	ices:			
	shale		- ' '	295		ft. after hrs. ft. after hrs.	pumping g.p.m.			
	red bed		295	301	11 Wat	er sample submitted:				
	lime		301	305		Yes No Date I head completion:				
	shale		305	<b>3</b> 16			Inches above grade			
	lime		316			Neat cement Bentonite th: From ft. to				
	shale		325	344		arest source of possible cont				
	lime		341	348		l disinfected upon complet	ion? Yes No			
	slate		348	350	15 Pum Mar	nufacturer's name	Not installed			
	lime		350	7335			capacity g.m.p.			
	shale		356		Тур	_	Turbine			
	(use a second sheet if needed	<del>d</del> )			=	Jet Certrifugal	Reciprocating Other			
16 Remarks: elevation						17 Water well contractor's certification: This well was drilled under my jurisdiction and this				
Topography:						ort is true to the best of my				
□нап						ness name	License No.			
Slope Upland Valley					Add Sigr		Date			

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## WATER WELL RECORD KSA 82a-1201-1215

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T	R	EW	5	ec	1/4	1/4	1/4	No.

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

1 Location of well:	County	Township name	Fraction		Section	on number		Town number	Range number			
Distance and direction from nearest town or city:  3 Owner of						of well:						
Street address of well location if in city:					Address:							
Locate with "X" in section below: Sketch map:						4 Well depth: ft. Date of completion in.						
	!!!						5	Cable tool Rotary	Driven Dug			
	iii						6 Use: Domestic Public supply Industry Irrigation Air conditioning Commercial Test well					
w												
	!!				,			sing: MaterialH	-			
<u></u>	S Mile							Threaded ☐         Welded ☐         Surface				
2	<u></u>	and color of material			From	То		in. to ft. depth D	rive shoe? Yes No			
	.,,,,							reen: anufacturer				
		shale			360		Ty Sle	rpe Di ot/gauze Le	ngth			
··· ,		red bed			364	375	Se	Set between ft, and ft Fittings:				
- 4		shale			375	378	Gravel pack Yes No Size range of material.					
		lime			378	379		9 Static water level: ft. below land surface Date				
		slate			379	381		mping level below land surfa				
		shale	* 1080		381	405	_	ft. after hrs.	pumping g.p.m.			
		sandy shal	e		405	420	11 W	ater sample submitted:				
		s. shale			420	450	12 Well head completion:					
		shale			450	505		Pitless adapter	Inches above grade  No			
	-	Lime & sha	le		505	510		Neat cement Bentonite	• 🗆 ـــــــــــــــــــــــــــــــــــ			
		shale			510	520	14 Nearest source of possible corft Direction		tamination:			
		shale blac	k		520	535			ion? Yes No			
		sandy shale				540	15 Pui Mo	mp:	Not installed			
					-lio	E60		odel number Hi ngth of drop pipe ft.				
s. shale s. shale					560	600		pe: ] Submersible	] Turbine			
	(IIIA	a second sheet if needed)				000	Ē	Jet	Reciprocating Other			
16 Remarks: elevation						17 Wo	ater well contractor's certific	cation:				
							is well was drilled under my port is true to the best of my	· .				
Topography:							Bus	siness name	License No.			
Slope							Ad	dress				
Upland Valley							Sig	Authorized represen	tative Date			

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Form WWC-5

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## T R EW sec 1/4 1/4 1/4 No

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

## WATER WELL RECORD KSA 82a-1201-1215

1 Location of well:	County	Township name	Fraction		Section number			Town number	Range number			
Distance and direction	3 Owner of well: Address:											
Locate with "X" in section below:  N  Sketch map:						l	4 Well depth: ft. Date of completion  Well diameter in.					
W							5					
2	Туре	and color of material			From	То	8 Scre	een:				
		sand	y-14		600	620	Тур	nufacturer Di ne Di t/gauze Lea	o			
		sand sand			620 630	-630 640	Fitt	Set between ft. and ft Fittings: **D Gravel pack				
	V 4						9 Stat	9 Static water level:ft. below land surface Date				
							10 Pum	0 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.				
·		110000	····					ter sample submitted:				
									Inches above grade			
								Neat cement Bentonite Depth: From ft. to ft.				
							ft.	learest source of possible contamination:  Type  Vell disinfected upon completion? Yes No				
			77-74-14				15 Pum Mar	p:	Not installed			
								del number HP gth of drop pipe ft.				
	s	78 AVII. W.1				·	Тур	Submersible	Turbine Reciprocating			
14. Domestic allowable		second sheet if needed)	<del></del>					Certrifugal er well contractor's certific	Other			
16 Remarks: elevatio Topography:							This	well was drilled under my ort is true to the best of my	urisdiction and this			
☐ Hill ☐ Slope ☐ Upland ☐ Valley								ness name Iress ———————————————————————————————————	License No.			

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