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 (Woter well Contractors) Topeka, Kansas 66620

		X					, •,	1	
	County	Fraction NE		- 1	Section r		Township number	Range number	
1. Location of well:	MOORIS	1 SE	-	1/4	2	2	T 14 S	5 R 9	E/W
2. Distance and dire		or city: 8 miles SE	4				ALE HEIDE		
Street address of well		alta Virta	•	R.R. or s	treet:				
311001 0001000 0. 1101		- Com		City, sta	ite, zip c	ode:	CTAVISTA P	15 6683	4
4. Locate with "X"		Sketch map:					6. Bore hole dia.		-7-76
<u> </u>							Well depth S ft. 7. X Cable tool Rotary		
	NE 9	nill					Hollow rad Jetted		
	NE '	nile + well					8. Use: Domestic I		
Mile	1 E	700 /	,					Air conditioning 💥 St	
Nouse							Lawn Oil field water Other		
							9. Casing: Material Tracking eight: Above or below Threaded Welded in.		
ļ		\mathcal{N}					RMP PVC	ISurface	in. lbs./ft.
	-	·					Dia. 5 in. to 4 ft. de		
5. Type and color of	f material				From	То	Dia in. to ft. de	pth gage No	
							10. Screen: Manufacturer's	name JASS*	SWEEK .
							Туре 200	Dia	
		-					Slot/gauze_SAWELA	⊅ €Length	
							Set between	 and	ft.
							Gravel pack? Size r		
							11. Static water level:	mo	./day/yr.
							_3 ft. below land su	urface Date	
							12. Pumping level below la		
							ft. after ft. after		
							Estimated maximum yield —		g.p.m.
							13. Water sample submitted:		./day/yr.
							Yes A No	Date	
							14. Well head completion: Pitless adapter	Inches above	arade
							15. Well grouted?		1
							With:Neat cement		Concrete _ 1
							Depth: From ft. to	-/5_ ft.	T
			10				16. Nearest source of possible ft. Direction	ole contamination:	de
							Well disinfected upon comp	letion? Yes	No 1
		1, 1					17. Pump:	✓ Not installed	
		fout Wel					Manufacturer's name		<u> </u>
	1 Vonner	1 ~					Model number Length of drop pipe	HP Vo ft. capacity	_g.p.m.
	- Cu						Type:		
							Submersible	Turbin	
	n:	se a second sheet if needed)					Jet Centrifugal	Recipr Other	ocating S
18. Elevation:	19. Remarks: , 1	se a second sheet if needed) Ras' Ris my	2000	70	1		20. Water well contractor's		<u>₹</u>
.o. Lievanon;	te/	Has' Mis	(,,,,,				This well was drilled under	1 ~	s report
Tonography	170	ma	₩				is true to the best of my kno	wledge and belief.	- 6
Topography:	MIL	my /					Business name	US E	ense No.
Slope M	1/1/100	•					Address /3 50V	THRELFR	XZZZ
Upland							Signed Signed	Man Date	K-976-11
Valley	l .						Mufhorized re	eresentative	
Forward the white, bl	ue and pink copies to the	Department of Health and Enviro	onment					Form WV	vc- s γ