WATER WELL RECORD KSA 82a-1201-1215

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

	County	Fraction	Section	number	Township number	Range number	
1. Location of well:	MORRIS	5W145E1/45W14	,	7	т 16	s R & EDV	
2. Distance and direction from nearest town or city: 4 W 3. Owner of well: DONAL & E WELLS G 3 CITYLIN							
Street address of well location if in city: Of Council GROVE City, state, zip code: MULVANE 1/15 67110							
4. Locate with "X" in section below: Sketch map:					6. Bore hole dia. 5 i Well depth 136 ft.		
HOUSE					7. Cable tool Rotar		
NW NE					Hollow rod Jetted Bored Reverse rotary		
					1 ' .	Public supply Industry Air conditioning Stock	
					Lawn Oil field water Other		
					9. Casing: Material 27	Height: Above or below	
S					RMP PVC		
1				То	Dia. <u>a</u> in. to ft. de Dia in. to ft. de	opth Wall Thickness: inches of page No.	
			From			name JASSYLAWEL	
	RLACHD	IRT + GRAVEL	0	3	Type	Dia	
BOCK WHITE & YELLOW			3	30	Slot/gauze	Length	
	SHALE BLU	•	30	40	Gravel pack? Size	andft.	
SHALE RED				52	11. Static water level: mo./day/yr.		
SHALE BLUE				52 64 12. Pumping level below land surfaces:			
			T .			hrs. pumping g.p.m.	
4 ME ROCK GRAY			64		Estimated maximum yield		
	SHALE BLU	Ę	 	98	13. Water sample submitted Yes X No	: mo./day/yr. Date	
ROCK GRAY			98	110	14. Well head completion:		
	SHALE BUL	IE	110	122	Pitless adapter	Inches above grade	
	ROCK GRAS	y ,	122		With: X Neat cement ft. to	1 1	
LIME ROCK AITE			120	/20	16. Nearest source of possil	ple contamination:	
				/	ft Direction Well disinfected upon comp		
					17. Pump:	Not installed N	
					Manufacturer's name Model number	HP 3 Volts 92	
			 		Length of drop pipe	ft. capacity ——g.p.m. ≥	
						Turbine	
(Use a second sheet if needed)					Jet Centrifugal	Reciprocating Other	
18. Elevation:	19. Remarks:				20. Water well contractor!		
					is true to the best of my known	my jurisdiction and this report whedge and belief.	
Topography:				LHHRAUSE Business name	SHOP 156		
					Address 13 South	SHE PAI GG	
Upland Valley					Signed Authorized re	ppresentative Date	
E	lue and pink copies to the Department	of Health and Environment				Form WWC-5	