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:	Marion	Ne 1/4/1 W 1/80	W 1/4	3	34	7 20 s	R 2	(B)	
2. Distance and direct	tion from nearest town or city:	5 2 3	3. Own R.R. or	er of wel	ŔŔ	2 Box 78	en Vo Li	20/	
4. Locate with "X" in	n section below:	Sketch map:	City, sr	ote, zip	code:	6. Bore hole dio 9 7 in	. Completion date	700	
Wile W	 				i	Well depth ft. 7 Cable tool Rotary Hollow rod Jetted 8. Use: Domestic P	Bored Re	everse rotary Industry	
SW	i SE !					9. Casing: Mater Welded RMP PXC	Little Shr: Aboyo 8 Surface 2 Walho 6 W	in.	
5. Type and color of material				From	То	Dia in. to ft. depth gage N200 Wall			
Top Sail				0	4	10. Screen: Agnufacturer's name Ermae Type Tyrene Dia. 5''			
Blow Sand				3	6	Slot/gauze Dia. Length O Set between ft.			
1/2//	low + RE	d Clay	Shal	1	35-	Gravel pack? Size ra	and	30"	
	Some u	Jater		35		11 Static water level:		lo./day/xr.	
Blue Shale				35	60	12. Pumping level below land surfaces:			
White Rock				60	78	ft. after hrs. pumping g.p.m ft. after hrs. pumping g.p.m.			
W	ater	~		28	79	Estimated maximum yield		g.p.m.	
Gra	ay Bock			79	P5	Yes No 14. Well head completion:	Date		
						Pitless adapter	2 Inches abov	re grade	
						With: Neat cement ft. to	<u> </u>		
						16. Nearest source of possible ft. Direction Well disinfected upon complete.	Type 7	ine No	
						17. Pump: Manufacturer's name	Not installed		
						Model number	HP V	olts	
						Type: Submersible	Turbi	ne ,	
(Use a second sheet if needed)						Jet Centrifugal	Recip Othe	101	
18. Elevation:	9. Remarks: OUNER Slab ouro		201	ner	ete	20. Water well contractor's of This well was drilled under m is true to the best of my know	y jurisdiction and th	is report	
Topography: Hill Slope Upland	Sian Goro	,,, a we,	, 7	グア)	× 4	Backhu Bosiness name, Address Found Signed Paul D	a Dr.	icense No.	
Valley	and pink copies to the Departmer	at of Health and Environment			i	Authorized rep	resentative Form W	25 - 79 ≥ wc-s	