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 (Water well Contractors) Topeka, Kansas 66620

·				1/	Topeka, Kansas 66620	
1. Location of well:	115 115	Section number		Township number	Range number	
1. Location of well: Chase NE _{1/4}	NE, NE,		3	1 21	s R 7	E/W
2. Distance and direction from nearest town or city: 5 m; 5 W J & S of C, W. Falls. Street address of well location if in city: Cotton wood F	alls Kons City,	ner of wel r street: state, zip	l: Us Z	S. Soil Con 11 Broadway o Honwood.	servation Falls Ku	Sorvice
4. Locate with "X" in section below: Sketch map:				Well depth 53 f	tary Driven D	on al use!
W NE	* *		later heel	8. Use: Domestic _	_ Air conditioning	Industry Stock
swse Water drainage		- 1 -) em	9. Casing: Material Threaded Welded _ RMP PVC	Height: Above (Surface Weight	or below in. lbs./ft.
5. Type and color of material		From	Та	Dia in. to ft. Dia in. to ft. 10. Screen: Manufacture	depth gage No.	inches or
dill disable also		35'	را ا	TypeSlot/gauze	Length	
drilled rock plug grout rest cement	t plus	35	53°	Set betweenSiz	ft. and	
				11. Static water level:		ma./day/yr.
of 6" from casing se				12. Pumping level below ft. after	hrs. pumping	
0-25'. Casing was 1				13. Water sample submitt Yes No	ed: r	g.p.m. no./day/yr.
and will be ent off ground level by Ch	below hilds Cont			14. Well head completion Pitless adapter	n: Inches abo	
Co. after final grad	,			15. Well grouted? YE With: Neat cement Depth: From ft.	Bentonite	_ Concrete
established around u	vell.			16. Nearest source of post ft Direction Well disinfected upon co	Туре	No.
				17. Pump: Manufacturer's name	Not installs	~ I
				Model number Length of drop pipe Type:		/olts ' g.p.m. :
(Use a second sheet if neede	ed)			Submersible Jet Centrifugal	Turb Reci Othe	procating
19. Remarks: Topography: Well plug	nged - see	abo	ve	20. Water well contractor This well was drilled under is true to the best of my leading to the least of the l	er my jurisdiction and t	his report
Hill Slope Upland Valley	/			Business name Address Signed Authorized	Jun Co Honu Blesse Da representative	icense No.