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

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

County		Fraction	T	Section	number	Township number	Range number	
	RVEY		$SE_{1/4}$			٠.٨	R - 1-E	E/47
2. Distance and direction from near	est town or city: 3	SOF SWI	4 243. Owne	er of wel	1: L.Z	V- Smith		
Street address of well location if in a	ity: ON A	NE 1/4 SE 1/4 S SOF SWI 2008 81 HI WA	R.R. or s	street: ate, zip	code:	FOS NEWTON	KS 67	114
. Locate with "X" in section below N		Skereli-map:	14TH		-	6. Bore hole dia. 10 in Well depth 25 ft.	n. Completion date	
l l		30/	,			7 Cable tool <b>X</b> Rotary Hollow rod Jetted	y Driven Dug	rse rotary
W - NE - NE - I	•					8. Use: Domestic I	Public supply Ind	lustry
SW SE	well Hou	usE Drive				Lawn G 9. Casing: Material		her
X   X   S   S   S   S   S   S   S	X Jan	X				Threaded Welded RMP PVC	iSurface	in. lbs./ft.
ı→ l Mile → ı	40000 103			F	T.	Dia. 5 in. to 75 ft. de Dia. in. to ft. de	pth Wall Thickness: inc	- ' 1
. Type and color of material				From	Το	10. Screen: Manufacturer's	7	
TOP SOI				0	3	Type RMP	Dia	
CIAY GR	4y			3	15	Set between 20	Length	ft.
SAND 7	LINE			15	20	Gravel pack 24 Size r	-	18-14
SHALE	GRAY-L	BIACK		20	60	1). Static water level:	urface Date 6 -/5-	/day/yr.
LIMESTO	NEWH	ITE		60	62	12. Pumping level below la	nd surfaces:	
SHALE-6	3/ACK			62	75	ft. after ft. after	hrs. pumping	. g.p.m.
						13. Water sample submitted:	mo.	/day/yr.
						Yes No  14. Well head completion:	Date	
						Pitless adapter  15. Well grouted?	/6_ Inches above	grade
						With: Neat cement ft. to		Concrete _
						16. Nearest source of possible ft. 50 Direction	le contamination: 7,e	e o
-						Well disinfected upon comp	letion?Yes	No
						17. Pump:  Manufacturer's name	Not installed	^
						Model number Length of drop pipe	HP Vol ft. capacity	
						Type: Submersible	Turbine	
	(Use a second s	sheet if needed)				Jet Centrifugal	Recipro	cating
Elevation: 19. Remarks:			tell	ľx4	,	20. Water well contractor's This well was drilled under		report
opography:	et. Klab	de Welfens compluse egulation	el she	Pres	nus	is true to the best of my kno	• •	7//
- Hill this	ps or R	egulation				Business name	O nantaio	ense No.
Slope Upland Valley		XXX	1	·	1	Signed Authorized re	Comis Date	-24-7
ward the white, blue and pink copi	es to the Department	of Health and Environment	· Sim	No.		70000126016	Form WW	