

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

## ABA

WATER WELL RECORD KSA 82a-1201-1215

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1	Γ	R	EW	sec	1/4	1/4	1/4	No.	

Kansas State Dept. Of Health (Water Well Contractors) Forbes–Bldg. 740 Topeka, Kansas 66620

			NENUNE			Topeka, Kansas 66620
	County	Township name	Fraction	- 1	on number	1
1 Location of well:	Nemaha	Gilman	WIS DEYA	- હ	ماه	2 /3
Distance and directi	ion from nearest town or c	ity: 51/2 Cast S	eneca, 30%	ner of well	. U.	emaha County Sanitar
	II location if in city:	·	Kansus Ad	ldress:	ه کے	andfill neco Kansas
Locate with "X" in s	section below: N	Sketch map:		8		4 Well depth: 49 ft. Date of completion 49 well diameter in.
	X			Z.	00'	5 Cable tool K Rotary Driven Dug Hollow rod Jetted Bored Reverse rota
w	E					6 Use: Domestic Public supply Industry Irrigation Air conditioning Commerci Test well Pizz Well
	S					7 Casing: Material VC Height: aboye/ Threaded Welded Surface 36 in. Diam. Weight 53 lbs./ft.
	1 Mile				Ι	in. to 49 ft. depth Drive shoe? Yes I
LIEU No	Ту	pe and color of material		From	То	8 Screen: Manufacturer Castain teed
	Top	Soil		0	4	Type PVC Dia. 2'' Slot/ Slot/ Length 20'
	Yell	ow Clay		14	17	Set between the and 49 ft.
	San	<u> </u>		17	26	Gravel pack 🔀 Yes 🗌 No Size range of material
	Cour	se Sand to	Gravel	26	41	9 Static water level: 9'3" ft. below land surface Date 5. /3-25
	Shal	e		4	49	10 Pumping level below land surfaces:
						Estimated maximum yield g.p.m.  11 Water sample submitted:
						Yes No Date
					<u> </u>	12 Well head completion: Capp dd ☐ Pitless adapter ☐ Inches above grade
						13 Well grouted? MYes No MNeat cement Bentonite Depth: From ft. to
						14 Nearest source of possible contamination:  ft 2000 Direction Type and Type
						Well disinfected upon completion? Yes X
						Manufacturer's name HP Volts
						Length of drop pipe ft. capacity g.m.  Type:  Submersible Turbine
	/	se a second sheet if needed)				Jet Reciprocating  Certrifugal Other
16 Remarks: elevat		so a secona sileer ii needea)				17 Water well contractor's certification:
						This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Topography:  Hill Slope						Strader Dr. Iling Co. Trc. 185 Business name Address Rt   Holton stanson Signed James Jahnson Date 63
Upland ▼ Valley						Signed 1 2 Authorized representative

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5