USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY,		1	M	T R EW sec 1/4 1/4 1/4 No.
PRINT CLEARLY.	/ATER WELL RECOR KSA 82a-1201-1215	וס לים	C	Kansas State Dept . Of Health (Water Well Contractors)
50	E 3E-5E	_		Forbes-Bldg. 740 Topeka, Kansas 66620
County Township name Frag	tion s &	1	on number	Town number Range number
Brown High that 5	NE		12	YNE RWADE 17E
Distance and direction from nearest town or city:	3 Owne	er of well	: WA	YNE MABE
Street address of well location if in city: N.E. Hidwith	4,/15 Addi	ress: R	T, Z	Hiawatha, Kansas
Locate with "X" in section below: N				4 Well depth: 4 O ft. Date of completion 8-11-15 Well diameter 2 in.
				5 Cable tool Markotary Driven Dug Hollow rod Jetted Bored Reverse rotary
w			,	6 Use: ☑ Domestic ☐ Public supply ☐ Industry
w	*	100	20'	☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐
	42			7 Casing: Material PUC Height: above/but
s	0,			Threaded Welded Surface 24 in. Diam. Weight 2.33 lbs./ft
1 Mile	,	<u>-</u>	l <u>-</u>	5 in. to 60 ft. depth Drive shoe? Yes No in. to ft. depth
Type and color of material		From	То	8 Screen: Manufacturer Pump co
Top Soil		0	4	Type PUC Dia
Yellow Clay		4	6	Slot/gauze <u>1025</u> Length <u>10</u> Set between <u>50</u> ft. and <u>60</u> ft
Fine Sand		6	9	Fittings: Gravel pack XYes No Size range of material
4ellow Clay		9	21	9 Static water level: NOT MEASURED
VFine SANCT		21	47	10 Pumping level below land surfaces: AIR TEST
COARSE SAND		47	53	ft. after hrs. pumping g.p.m ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m.
GREY Limes Tone		53	54	11 Water sample submitted:
Blue Shale	***	501	60	Yes No Date
			200	Pitless adapter 34 Inches above grade
				13 Well grouted?
				Depth: From ft. to ft.
				14 Nearest source of possible contamination: #09 ft
			<u> </u>	Well disinfected upon completion?
				Manufacturer's name HP Volts
				Length of drop pipe ft. capacity g.m.p. Type:
				Submersible Turbine
(use a second sheet if needed)				☐ Jet ☐ Reciprocating ☐ Certrifugal ☐ Other
				17 Water well contractor's certification: This well was drilled under my jurisdiction and this
Topography:				report is true to the best of my knowledge and belief.
☐ Hill ☑ Slope			-	Business name Address RFD Holton, Kansas
Upland				Signed Authorized representative
Forward the white, blue and pink copies to the Kansas State Dept. Of Health.				Form WWC-5

BR = 1007 ==