WATER WELL RECORD KSA 82a-1201-1215

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

				Topeka, Kalisas 00020
County	Fraction	Section	number	Township number Range number
1. Location of well: Sumner	5W1/4 NW1/4 NW	1/4	9	T 30 S R / OM
2. Distance and direction from nearest town or city:	w of Berre	3. Owner of well	13	I'LL PHIPPS
Street address of well location if in city:	1me 3/2 170.	R.R. or street: City, state, zip o	ode:	Peck, Ka 67/20
4. Locate with "X" in section below:	Sketch map:			6. Bore hole dia. 40 ft. Completion date 40 ft.
				7 Cable tool X Rotary Driven Dug
NW NE 3) 8				Hollow rod Jetted Bored Reverse rotary
				8. Use: Domestic Public supply Industry Irrigation Air conditioning 🗶 Stock
SW SE SE				Lawn Oil field water Other 9. Casing: Material Height: Above or below
				Threaded Welded iSurface 16 in
S				RMP PVC 84 Weight lbs./ft Dia. 5 in. to 30 ft. depth Wall Thickness: inches or
5. Type and color of material		From	То	Diain. to ft. depth gage No 1 2 5 9
40P5011		O	/4	10. Screen: Manufacturer's name
CALL			2	Sloy gauze 25/1000 Length
SAMA		6	30	Set between 30 ft. and 6 ft
BRAVEL		30	40	Gravel pack? 185 Size range of material 16 4 3
				11. Static water level: mo./day/yr
				12. Pumping level below land surfaces:
				ft. after hrs. pumping g.p.m.
				Estimated maximum yieldg.p.m. 13. Water sample submitted:mo./day/yr
				Yes _X No Date _\$ -1.4 - 78
				14. Well head completion: Pitless adapter Inches above grade
				15. Well grouted? YES
				With: Neat cement Bentonite Concrete Depth: From ft. to ft.
				16. Negrest source of possible contamination: RIVER
				Well disinfected upon completion? YesN
				17. Pump:Not installed Manufacturer's name
				Model number HP Volts
				Length of drop pipe ft. capacityg.p.m. Type:
**				Submersible Turbine Reciprocating
(Use a second	sheet if needed)	·		Centrifugal Other
18. Elevation: 19. Remarks:				20. Water well contractor's certification: This well was drilled under my jurisdiction and this report
Topography				is true to the best of my knowledge and belief.
Topography: Hill				Business name License No
Slope Upland				Address Boy Flags Address Boy
Valley				Signed Authorized representative Date

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5