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

WATER WELL RECORD From Skelch & lopo, KSA 82a-1201-1215 ABA & AAB

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

	UNE AB	8.5					
1. Location of well:	Section number	Township number	Range number				
BROWN 5 1/4 5 1/4 1 1/4	13		s R 15 (E)W				
/ - / - /	rner of well: R	ay Skoch					
Street address of well location if in city: FAIRVIEW, KS R.R. or street: City, state, zip code:		PowhATTAN, 1	Ų ₅				
4. Locate with "X" in section below: Sketch map:		6. Bore hole diain. Completion date2=17=77					
BARN HOUSE /// Ser Sie - SE - SW SE - SE - SW - SE - SE -		Well depth 80 ft.					
			7 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary				
		8. Use:					
				ı→ 1 Mile → ı	7		epth Wall Thickness: inches or
				5. Type and color of material	From To	Diain. to ft. d. 10. Screen: Manufacturer'	
				TOD Soil	03	Type PUC	Di- 5"
				11-11 01	-3 1-	(lot)gauze 080	
yellow Clay	310	Set between55	ft, andft.				
BROWN GRITY Clay	1014	Gravel pack? Size	range of material 14x 15				
Yellow SANDSTONE	14 21	11. Static water level:	mo./day/yr. surface Date <u>2 -17-17</u>				
GREY Shale	2135	12. Pumping level below to	and surfaces: AIR TEST				
Green Limes Tone	35 40		hrs. pumping g.p.m.				
Orac Shala	113	Estimated maximum yield					
STREY DATE	70 57	Yes No	Date 2-17-27				
Greef Linestone - WATER	5/ 60	14. Well head completion:	CAP				
Grey Shaley Limes Tone	60 65	Pitless adapter 15. Well grouted? ###	34 Inches above grade				
Rhia Shala	1 5 170		Bentonite Concrete				
DILLE STIME	65 75	Depth: From ft. t	to ft.				
Gray LimesTone	15 80	16. Nearest source of possi	ble contamination: Als U. Type LATERAL				
		Well disinfected upon com					
3500 MP1 P6/2010		17. Pump:	Not installed				
JJOU IIIT L - (MIDRIOLE 5		Manufacturer's name Model number	HP Volts				
CASING Pulled - GROWTED		Length of drop pipe	ft. capacityg.p.m.				
And Holo Plugged	'	Type: Submersible	Turbine				
1117 19 1		Jet	Reciprocating				
(Use a second sheet if needed)		Centrifugal	Other				
18. Elevation: 19. Remarks:	4 0	20. Water well contractor					
1042 3580 CL only for Che	m. Axoly	is true to the best of my kn	my jurisdiction and this report owledge and belief.				
Topography:	•	STRAGER DR	69 GFN. 182				
Hill		Business name	/ Tippers No.				
Upland		Address Address	2100 KS				
Valley		Signed Authorized r	epresentative Date				

Forward the white, blue and pink copies to the Department of Health and Environment $\overrightarrow{BR} = 1022$