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

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

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

1. Location of well:  2. Dispins and display from nearyst your or city:  3. E-1/5.  3. Owner of well:  3. A Locate with "X" in section below:  4. Locate with "X" in section below:  5. E-1/5.  4. Locate with "X" in section below:  5. E-1/5.  5. E-1/5.  6. Bore hold dia. — In. Completing day  Well depth Co. Et E					$ \downarrow$		· · · · · · · · · · · · · · · · · · ·	1 17		
2. Disputes and disputing from negative from		County Fraction		Section number		Township number	Runge number			
2. Object and disprise from nearly there are ally 3 £ E / 1	1. Location of well:	CLAY	541/4 SE 1/4 NO	11/4	′ ′⁄′、	3	T 8 s	R #3	(E/W	
4. Locate with "X" in section below:  Sketch map:  Well depth	2. Distance and dire				ner of well	l: \/	ACK MCK			
A. Locate with "X" in section below:  Sketch maps  A. Locate with "X" in section below:  Sketch maps  A. Locate with "X" in section below:  Well depth	5E	45-148			_					
Well depth JC. ft.  Well depth JC. ft.  Well depth JC. ft.  To clothe load y Renyal Johnson  B. Use: Y Domestic Public supply industry  Industry Industry  Industry Industry  In	StreeT address of well	l location it in city: (2.47)	LAY CENTE,	e 6743	2					
No	·								5	
No	Ŧ [ !	ı					7 Cable tool 🗹 Rotary	y Driven Dug		
Irrigation	NW	NE							rse rotary	
Irrigation	י או י	!					8. Use: 🗶 Domestic I	Public supplyInd	lustry	
9. Casing: Material PUL Height Above at ballow threaded Wided Wide	₹ W - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -						Irrigation /	Air conditioning Sto		
9. Colling: Meterial EME Paleght. Above as below threeded. Welfact. Surface 2 1. In. RNP PVC Metaph 2 lbs./h. Dis. 2 in. to PVC Metaph 2 lbs./h. Dis. 2 in. to PVC Metaph 2 lbs./h. Dis. 2 in. to Dis.										
State   Stat										
5. Type and color of material  From To  10. in. to 10. depth/Wall Thickness inches y Dia. in. to 10. depth/hage No. Lot ##  10. Serent Manufacturer's name  10. Serent Manufacturer's name  10. Serent Manufacturer's name  10. Serent Manufacturer's name  11. Safet were Langth ##  12. State were Level.  12. Type Dia. State Were  13. Set between Sh. ft. and III. State Were Langth ##  14. State were level.  15. The plack? With a state of pack?  13. Notice were level.  14. Well hood completion:  15. Well grouped?  15. Well grouped?  15. Well grouped?  15. Well grouped?  16. Nevers to op pack place of pack pack.  17. Pumping level below large uprigues.  18. Elevation:  19. Remarks:  19. Remarks:  19. Remarks:  10. Signoware Manufacturer's name  10. Serent Manufacturer's name  10. Serent Manufacturer's name  10. Serent Manufacturer's name  10. Serent Manufacturer's name  10. Nevers to op passible or pack pack.  10. Nevers to op passible or pack.  10. Nevers to op passible or pack pack.  10. Nevers to op pack pack.  10. Nevers to opped to	1									
5. Type and color of material  From To Dio	_									
10. Screen: Manufacture 's name Applications' in the second sheet if needed)  10. Screen: Manufacture 's name Applications' in the second sheet if needed)  10. Screen: Manufacture 's name Applications' in the second sheet if needed)  10. Screen: Manufacture 's name Applications' in the second sheet if needed)  10. Screen: Manufacture 's name Applications' in the second sheet if needed)  10. Screen: Manufacture 's name Applications' in the second sheet if needed)  10. Screen: Manufacture 's name Applications' in the second sheet if needed)  11. Static water level:  11. Static water level:  12. Pumping level below light authorized aurface Date 1. Static water level:  12. Pumping level below light aurfaces.  13. Water sample submitted:  14. Well head completion:  15. Well provided Level:  15. Well provided Level:  16. Negret source of possible contemination:  16. Negret source of possible contemination:  17. Pumping Applications Note installed Manufacture's name Applications of the Static Reciprocating Controlled Level:  18. Elevation:  19. Remarks:  19. Remarks:  19. Remarks:  19. Remarks:  10. Screen: Manufacture's name Applications on this report is true to the best of my knowledge and belief.  20. Manufacture's certification:  19. Remarks:  10. Screen: Manufacture's name Application and this report is true to the best of my knowledge and belief.  20. Manufacture's certification:  10. Note well controctor's certification and this report is true to the best of my knowledge and belief.  21. Well is the second of the second se					From	То				
Type   Length   Len	, p						10. Screen: Manufacturer's	name		
BREWN CAY   23   Sign source   Length		Topes 11				2				
Set between		167301-			10			7 010.	2/	
Second pack?   Size range of material   Size		BREWN C	CAY		2	23			ft.	
The property is the property in the property	,	, /			153	<.	ft.			
1   1   1   1   1   1   1   1   1   1		IMESTONE LA	JERS IN CLA	4	123	2	Gravel pack? Size r	ange of material	×3	
## Fig. of the control of the contro		BROWN CO	AY		52	64	1 , ,		/day/yr.	
Fig.   SHALE   13   16   16   16   16   16   16   16	LIMESTENE				66	93			g.p.m.	
13   13. Water sample submitted: mo./day/yr. Yes No Date   14. Well head completion: Pitless adapter   16. Nearest source of possible, contamination: ft. 30   20   20   20   20   20   20   20	RED SHALE				93	116	ft. after	hrs pumping	. g.p.m.	
BLUE SHALE   133   14. Well hood completion:   Pitless adapter		LIMESTONE			116	123	13. Water sample submitted:			
Pitless adapter Inches above grade    Inchest above grade   Inchest above grade		BILLS SHAL	5		123	4.0	7	Date		
With:Neat comentBentoniteConcreteDepth: From		•			1	12.1	1	Inches above :	grade	
Depth: Fromft. toft.  16. Nearest source of possible contamination: ft		LIMESTON	<u> </u>		128	13/				1
16. Nearest source of possible, contamination:   17. Pump:		PED SHAL	<i>Ę</i>		127	151			Concrete _	- P
ft. 3D Direction MPT Type 1801C Not		7.20 3/1//2	<u> </u>		1/	102				\
Well disinfected upon completion?						ļ	16. Nearest source of possit	ple contamination:	otic to	INE
Manufacturer's name					-		Well disinfected upon comp	letion? Yes	No	1
Model number					1	<b>†</b>	17. Pump:	Not installed		-/\
Length of drop pipe ft. capacityg.p.m.  Type: Submersible Turbine Jet Reciprocating Centrifugal Other  18. Elevation: 19. Remarks:  20. 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  Business name License No.									<del></del>   `	M
Type:    Submersible							į			`_( <u></u>
Submersible   Turbine   Reciprocating   Other					+			11. capacity	-g.p.m.	`∵
(Use a second sheet if needed) CentrifugalOther  19. Remarks:  20. 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  Business name  License No.							1 "	Turbine		1.
18. Elevation:  19. Remarks:  20. 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  Business name  License No.									cating	~  <i>`</i>
Topography:  Topography:  Hill  Topography:  License No.		[	sheet if needed)			<u> </u>	Centrifugal	Other		نگار ہ
Topography:  Hill  Business name  License No.	18. Elevation:	19. Remarks:					1		report	1
Business name License No.							1			
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orward the white, blue and pink copies to the Department of Health and Environment		ue and pink copies to the Departmen	at of Health and Environment				7	Form WW	/C-5	'E