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WATER WELL RECORD 5 (C KSA 82a-1201-1215 Kansas Department of Health and Environment-Division of Environment (Water well Contractors)

1:10

	at stal		Cba		7) 3	Topeka, Kansas 66620
Location of well:	Mal /4 Acal 1/4 S	W1/4	Section 3	number	Township number	Range number S R / G E E/W
Distance and direction from nearest town or city:	SIFAF		ner of well	Dat	n Pritch	
et address of well location if in city:	but	R.R. or	street:	1827	1 S.W Seal	broi K
ocate with "X" in section below:	Sketch map:	City, s	idle, zip d	ode:	10peka 6. Bore hole dia.64	in. Completion date
N	1			}	Well depth 205	ft
NW NE	1					etted Bored Reverse rotary
	\neg	11	1			Public supply Industry
	1 1	well			Lawn	Air conditioning Stock Oil field water Other
SW SE	form e	104				Height Aboy or below Surfacein.
S					RMPXPVC_	Ibs./ft.
ype and color of material			From	То		. depth Wall Thickness: inches or . depth gage No
<u> </u>			-		10. Screen: Manufactur	er's name
Clay yellow			0	//_	Type	
Clay asand			//	26	Slot/gauze	ft. andft.
Shale grey			26	35	Gravel pack? 100 Si	ze range of material
Lime Ha	rd		35	38	11. Static water level:	mo./day/yr. nd surface Date * / * / * / * / * / *
Shale			38	53	12. Pumping level below	w land surfaces: hrs. pumping g.p.m.
Lime			53	62	ft. after	hrs. pumping g.p.m.
Shale			62	21	Estimated maximum yiel 13. Water sample submi	
hime	Herd		71	75	Yes X No	
Shale a	-40		75	90	Pitless adapter	24 Inches above grade
Lime	Wad			93	15. Well grouted?	t Bentonite Concrete
Shale	ctick		93	167	Depth: From f	ossible contamination:
lima.	Mark way		102	107	ft Direction Well disinfected upon c	ompletion? Yes No
2/ /2	and green		102	120	17. Pump: Manufacturer's name	Not installed
Shale	1/		100	180	Model number	HP Volts
JARE SA	ina layer	>	120	7,00	Length of drop pipe Type:	
Sands Tone			180	305	Submersible Jet	Turbine Reciprocating
	sheet if needed)	11	, ,		Centrifugal 20. Water well contrac	Other
ou ou ner	to insta	11 5	lab		This well was drilled un	der my jurisdiction and this report
graphy:					is true to the best of my	n Dulling 3/6
_ Hill _ Slope					Address — Address	A Coense No.
_ Upland _ Valley					Signed Authorize	d representative Dat 8/18/19
rd the white, blue and pink copies to the Departmen	t of Health and Environment					Form WWC-5

BK=1072 D= 953

MI-1023