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

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WATER WELL RECORD KSA 82a-1201-1215

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

VYO

1. Location of well:	Fraction SW	-	Section 25	number	Township number Range number Community Range Number Range	
2. Distance and direction from nearest town or city: 3	NW 1/45E 1/4 SE		er of well	l: Dr		
R.R. a			Owner of well: Dean Tuchy, or street: RR#2			
Street address of well location if in city: Mexiden R.R. C. City,			state, zip code: Mcrider, Kg 66512			
4. Locate with "X" in section below:	Sketch map:		١	1	6. Bore hole dife. in. Completion date	
	(well			\	7 Cable tool	
NW NE	X well Drawnage				Hollow rod Jetted Bored Reverse rotary	
E W	/ Drainage			11	8. Use: Domestic Public supply Industry Irrigation Air conditioning Stock	
SW 55 4				1	Lawn Oil field water Other	
				/	9. Casing: Material Height Above or below Threaded Welded Surface 24 in.	
5 3/=	الموالة المالية الموالية في منطق من الموالية الموالية الموالية في منطقة والموالية الموالية الموالية والموالية والمراكبة الموالية و		-		RMPPV@kc_Weight 2.74_lbs./ft.	
1 Mile ————————————————————————————————————			From	То	Dia in. to ft. depth Wall Thickness: inches or Dia in. to ft. depth gage No 5	
5. Type and color of material			rrom	10		
Tup Soil			0	3	Type Pre Dia. 511	
Black loam			3	~	Slot gauze Length 40	
					Set betweenft. andft.	
Brown Silty Clay	1		7	20	Gravel pack? Size range of material 00000	
Brown Shale			20	23	11. Static water level: mo./day/yr. 20 ft. below land surface Date 8-18-28	
Gray Shole			23	25	12. Pumping level below land surfaces: 4, L Z	
Gray Sandy Shot	_		25	46	ft. after hrs. pumping g.p.m ft. after hrs. pumping g.p.m.	
	ar'				Estimated maximum yieldg.p.m.	
Gray Soundstone	\		46	63	13. Water sample submitted: mo./day/yr	
Gray himestone			63	74	14. Well head completion:	
Bray Shale			14	80	Pitiess adapter 24 Inches above grade 15. Well grouted? 15	
/					With: Neat cement Bentonite Concrete	
					Depth; From ft. to ft. 16. Nearest source of possible contamination: **Work**	
					ft Direction Type	
					Well disinfected upon completion? Yes No 17. Pump: Not installed	
					Manufacturer's name	
					Model number HP Volts Length of drop pipe ft. capacity g.p.m.	
					Туре:	
					Submersible Turbine Reciprocating	
(Use a second s	heet if needed)				Centrifugal Other	
18. Elevation: 19. Remarks:	11 (1-1				20. Water well contractor's certification: This well was drilled under my jurisdiction and this report	
Topography:	11 3100				is true to the best of my knowledge and belief.	
Topography: Hill 16. well in Page	sture				Business name License No.	
Slope					Address X 1 / 40 / 10 / 1 / 1 / 10 / 10 / 10 / 10	
Valley					Signed Authorized representative Date Authorized representative	
Forward the white, blue and pink copies to the Department	of Health and Environment				Form WWC-5	

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