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

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

County	Fraction	Section	number	Township number	Range number
1. Locotion of well: ShERIJAN	7W/4 7W/4 70W/4		34	1 10	R 28-29 ED
2. Distance and direction from nearest town or city:	/	vner of wel	II: S	Jacob Wie	Denon
Street address of well location if in city: $\int m{\omega}$	2 n of Dranfille R.R. City,	or street: state, zip	code:	Gramfield	X.5
4. Locate with "X" in section below:	Sketch map:	THE STATE OF THE S		4	n. Completion date 4-10-80
	<i>la</i>			Well depth    7 Cable tool    Rotar	
NW NE		B	<u>w</u>	Hollow rod Jetter	Bored Reverse rotary
E W	7.100	· [			Public supply Industry Air conditioning Stock
SW SE	7/00° 300	,_	<b>-</b>	Lawn (	Oil field water Other
_				9. Casing: Material Threaded Welded	
5 1 Mile	m	-		RMP PVCX	Weight lbs./ft.
5. Type and color of material		From	To	Diain. to ft. de	pth gage No. 2007X
X 1		0	20	10. Screen: Manufacturer's	name Ybsox
1 op soul			x /	Type PUC Slot/gauze A - Ma	Dia
Sandy clay		27	66	Set between	_ft. andft.
M. gravel		66	20	V	andft. ange of materialft.
Sanly clay	·	20	95	11. Static water level: ft. below land so	mo./day/yr.
M. gravel		85	90	12. Pumping level below for	nd surfaces:
Sand stone		90	94	ft. after	
Sanduala		GI	9/	Estimated maximum yield	
900		96	00	Yes X No	Date
S. Chave grave		16	77	14. Well head completion:  Pitless adapter	12 Inches above grade
Sandy olay		77	118	15. Well grouted?	
Ochre		1/8	128	Depth: From ft. to	Bentonite Concrete -
				16. Nearest source of possib	le contamination:
				Well disinfected upon comp	etion? Yes No
				17. Pump: Manufacturer's name	touche ==
				Model number	HP
				Type:  Submersible	. ,
				Jet	Turbine Reciprocating
(Use a second shall be a secon	eet if needed)	_L	I	Centrifugal 20. Water well contractor's	Other
				This well was drilled under r	ny jurisdiction and this report
Topography:				is true to the best of my know	yledge and belief.
₩ Hill Slope				Business name Address	License No.
Upland Valley				Signed Authorized re	presentative Date 6-16-10
orward the white, blue and pink copies to the Department of	of Health and Faviranment		1	/	Form WWC-5