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

	County	Fraction		Section number		Township number		Range number	
1. Location of well:	OTTOWA	5W1/45E1/4/19	NZV4		36		10 s	R 4	E/X
2. Distance and direction from nearest town or city: 5 N 3. Owner of well: Bob Woods									
Street address of well location if in city: MINNEAPOLIS City, state, zip code: MINNEAPOLIS KINS 67467									
4. Locate with "X" in section below: Sketch map:						6. Bore hole dia in. Completion date			
I N	· · · · · · · · · · · · · · · · · · ·					-	epth LOCit.	Driven Dug	#
= NW NE -						Hollow rod Jetted Bored Reverse rotary 8. Use:			
						9. Casing: Material Height: Above or below			
						Threaded			
						11 M			
5. Type and calor of	moteria!			From	То		n. to ft. dept :_ Manufacturer's n		
	TOPSO1	/		0	3		PINE	~	
				. 7	,-, 0	Slow/gauze	1164	_ Dio _ Length	27
BROWN /CAY				3	4	Set betwee	onft. o	ft, and	ft.
SAND				17	34	Gravel pa	ck? Size rai	nge of material	14
BROWN CLAY				34	40		water level: _ft, below land sur		./dgy/yr. 7 /
BROWN LLAY W/ROLK LAYERS				40	57		ng level below land	surfaces:	
SANDROCK				17	100		<i>[//</i>]	rs pumping	_ g.p.m. _ g.p.m.
	SANURI			3/	100		maximum yield	50	g.p.m.
	STOP	<u> </u>		100		13. Water Yes	sample submitted: No	mo: Date	./day/yr.
				_		14. Well h	nead completion:	10	
							routed? <u>V25</u>	18 Inches above	grade
						With:	Neat cement		Concrete
							m ft. to .		0
						16. Negrest source of possible contamination: SETTS ft. 300 Direction 1451 Type			
				ļ		Well disin	fected upon comple	Yes Yes Yes Not installed	<u></u> № 1
						Manufactu	rer's name	<u> </u>	"\
						Model num Length of a	-	HP Vol ft. capacity	10
						Туре:			
						Sub	bmersible P	Turbing	e ocating
	(Use a second s	heet if needed)		<u> </u>	L		ntrifugal	Other	—— , €
18. Elevation: 19. Remarks:							well contractor's o was drilled under m	ertification: y jurisdiction and this	1 '
						is true to the best of my knowledge and belief.			
— ни						Business name License No.			
Slope V Upland						Address	1)4.10	KANSK	- 1 × 1 × 1
Valley						Signed -	Authorized rep	reentative 7 2	2176 EIR

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5