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

WATER WELL RECORD ASA 82a-1201-1215

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

	County	Fraction	Section number		number	Township number Range number		
1. Location of well:	GOUE	SW 1/45 E 1/4 #	1/4	27		T /4/ S	R 29	E/W
2. Distance and dire	ction from nearest town or city:	OUE KS	3. Owner	of wel	1: H+1	Ruld hundari	EN	
Street address of well location if in city: 11 5 - 9 (1)								
			City, state	e, zip	code:	6. Bore hole dia. — in.		2-15-77
4. Locate with "X" i N		Sketch map:				Well depth 19 ft.	Completion date Z	
i I	!				Ī	7 Cable tool X Rotary		
NW 7-	NE				ļ	Hollow rod Jetted	Bored Reve	rse rotary
W E						8. Use: _XDomestic Public supply Industry		
≥ w						Irrigation Air conditioning Stock Lawn Oil field water Other		
sw se						9. Casing: Material Height: Above or below		
<u> </u>						Threaded Welded RMP PVCX	iSurface	in.
S 1 M						Dia. 2 in. to 19 ft. dep		
5. Type and color of material					То	Dia in. to ft. dep		
1					\vdash	10. Screen: Manufacturer's n		
typ suil				0	7	Type		
Sendy clay				2	13	Slot/gauze 1/8		
Strong Class					12	Set betweenft. o	ft. and ind	ft.
giano	<u> </u>			13	16	Gravel pack? X Size ra	nge of material 🎉 🗴	1/4
Ochie			1.	16	19	11. Static water level:		/day/yr.
	REMA	1				ft. below land sur		
	1,78,037	. 14				ft. after h	rs. pumping	.g.p.m.
						ft. after h		
						13. Water sample submitted:		/day/yr.
****						· · · · · · · · · · · · · · · · · · ·	Date	
						14. Well head completion: Pitless adapter	4	
						15. Well grouted?	Inches above	grade
						With: X Neat cement		Concrete
						Depth: From ft. to .		\ \
		· · · · · · · · · · · · · · · · · · ·				16. Nearest source of possible ft Direction	contamination:	ne_ '
						Well disinfected upon comple	tion?Yes _	No
						17. Pump:	X Nat installed	_ N
						Manufacturer's name Model number	HP Vol	
						Length of drop pipe	_ ft. capacity	.g.p.m. (
						Type: Submersible	Turbine	
						Jet	Recipro	1 10
	(Use a secand s	heet if needed)				Centrifugal	Other	—— × 1
18. Elevation:	19. Remarks:					20. Water well contractor's of This well was drilled under my		report
_						is true to the best of my know	ledge and belief.	_
Topagraphy: Hill						STRUCK NOFF Business names		2 <i>9</i> &
Slope						Address CTRINNEL	6 K3	=
Upland Valley						Signed Authorized repr	esemurive Date	12-21 27
Forward the white, blu	e and pink capies to the Department	of Health and Environment					Form WW	C- 5