

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:	Salvie	NE1/45E 1/45E 1/4				T 14 s	R 3W	E/W	
2. Distance and direc	ction from nearest town or city:	x Marrison							
Street address of well location if in city: Denter Clivere Seline KS R.R. or street: Dec City, state, zip code:					Deral der 1	Salving Kans 67401			
4. Locate with "X" in section below: Sketch map:					6. Bore hole dia in. Completion date Well depth ft				
					7Cable toolX Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary  8. Use: Domestic Public supply Industry Irrigation Air conditioning Stock X Lawn Oil field water Other  9. Casing: Material Height: Above or below  Threaded Welded Surface in.  RMP PVC Weight lbs./ft.  Dia in. to ft. depth Wall Thickness: inches or Dia in. to ft. depth lgage No Schi Y				
5. Type and color of material					То	10. Screen: Manufacturer's name Shop			
Allaviums				0		Type 5/0ts Dia. 4 " Slot/gauze 3/32 Length 3 Set between 5 2 ft. and 5 5 ft.			
Clay, silty, tou					19				
Gravel, fine to coarse + sand				19 5	57	Gravel pack? Size range of material 3/18			
Wellington fin:						11. Static water level:	face Date 1	/day/yr. 77_	
	la gallon gra			5.54		14. Well head completion: Pitless adapter	nrs. pumping 5 0  hrs. pumping 6 0  mo./	g.p.m. g.p.m. /day/yr.	
						15. Well grouted? Bentonite Concrete Bentonite Concrete			
						16. Nearest source of possible ft. Letter Direction — Well disinfected upon comples 17. Pump:  Manufacturer's name Model number Length of drop pipe Type: Submersible	e contamination: Type Area etion? X Yes X Not installed HP Volt ft. capacity Turbine		
(Use a second sheet if needed)					JetReciprocating				
18. Elevation:  Topography:  Hill  Slope  Upland  Valley	19. Remarks:			ALCO MADAGES OF THE CONTROL OF THE C		20. Water well contractor's This well was drilled under m is true to the best of my know Harding Address Signed Authorized rep	y jurisdiction and this wledge and belief.  Lice Lice S-2. Date	report	

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

Form WWC-5