## 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	7	
1. Location of well:	Saline Nal 1/45W 1/45W 1/4 13		3	T 14 s	R 360 E/W			
Street address of well location if in city: 223 W. Prescott				er of well: Harry Jett street: 223 W. Prescott ate, zip code: Salua Kaus 67401				
4. Locate with "X" in section below:  Sketch map:				rare, zip	code:	6. Bore hole diain		
	Continue of the Continue of th	Á M				7 Cable tool Rotary Hollow rod Jetted 8. Use: Domestic Po Irrigation A Lawn O 9. Casing: Material	Driven Dug Bored Reverse rotary ublic supply Industry ir conditioning Stock oil field water Other Height: Above or below	
S 1 Mile						Threaded Welded Surface in.  RMP PVC Weight lbs./ft.  Dia in. to ft. depth Wall Thickness: inches or		
5. Type and color of material				From	То	Diain. to ft. dep  10. Screen: Manufacturer's	oth gage No. 2: 40	-
Alluvium:						Type 5/8 ts Slot/gauze 3/32 "	*	
Alluvium:  Clay + silt, tan  Sand, fine, silty  Gravel, fine to coarse				0	43	Set between	_ft. andft.	
THE CONTRACT OF THE CONTRACT O	Sand, Pine Si	ity		43	50	Gravel pack? Z Size ra	andft. inge of materialft.	-
	Gravel fine t	o Course	effects and report and the second con-	50	60	11. Static water level:	mo./day/yr. rface Date <u>3 16 77</u>	
						12. Pumping level below land for after ft. aft	d surfaces: hrs. pumping 30 g.p.m. hrs. pumping g.p.m. g.p.m. mo./day/yr.  Date Concrete 10 ft. le contamination: Type Carden etion? X Yes No Not installed le chy X Volts 115 ft. capacity 10 g.p.m. Turbine Reciprocating	
18. Elevation:	(Use a second sl	neet if needed)	and the second	1		Centrifugal 20. Water well contractor's	Other certification:	- 6
Topography:HillSlopeUplandX_Valley						This well was drilled under n is true to the best of my know Authorized repairs and the second secon	Eleng 126 26 License No. 24 94-11-77 Date Date	1/4 1/4 1/4

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

Form WWC-5