WATER WELL RECORD KSA 82a-1201-1215

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

				r			1		
1	County	Fraction		Section number		Township number	Range number		
1. Location of well:	Rice	ne 1/4 ne 1/4 nw 1/4		12		т 18 s	r lOw	E/W	
Street address of well location if in city: Bushton Ks.					3. Owner of well: David Hoelscher R.R. or street: Rl Bushton, Ks.				
City, store, zip code:									
4. Locate with "X" in section below: Sketch map:						6. Bore hole dia. <u>8</u> in Well depth <u>210</u> ft.	11-11-7	7	
W - NW NE - NE - NE - NE - NE - NE -						7Cable tool X RotaryDrivenDugHollow rodJettedBoredReverse rotary 8. Use: X DomesticPublic supplyIndustryIrrigationAir conditioningStockLawnOil field waterOther			
						!←── 1 Mile ——→ı			
5. Type and color of	material			From	То	10. Screen: Manufacturer's Jetstream			
	T	op Soil-Clay		0	30	Type DVC	Dia 5"		
Silty Clay				30	70	Slot/gauze 1/32" Set between 180	Length <u>30</u> _ft. and <u>210</u>	ft.	
silty sand				70	88	Gravel pack? X Size ro		<u>8-3"/</u> +"	
Clay				88	160	11. Static water level: mo./day/yr. 40 ft. below land surface Date 11-11-77			
Sand Rock-Clav			•	160	175	12. Pumping level below lan	d surfaces:		
Sand Rock				175	210	ft. after	hrs pumping	_ g.p.m.	
						Estimated maximum yield		g.p.m. ./day/yr.	
							Date		
						14. Well head completion: Pitless adapter	12 Inches above	grade	
						15. Well grouted? X With: X Neat cement Bentonite Concrete			
						Depth; From ft. to	<u>10</u> ft.		
						16. Nearest source of possible ft. 75 Direction E	т _{уре} <u>Se</u>		
						Well disinfected upon complete. 17. Pump:	<u>X</u> Not installed	No	
	44 4W 46 (1) m 4					Manufacturer's name	HP Vo		
				<u> </u>		Length of drop pipe	ft. capacity	_g.p.m.	
***						Submersible	Turbine	l l	
	(Use a second	sheet if needed)				Jet Centrifugal	Recipro	ocaring S	
18. Elevation: 19. Remarks:						20. Water well contractor's certification: This well was drilled under my jurisdiction and this report			
Topography:						is true to the best of my knowledge and belief.			
—— Hill						Business name License No.			
Slope X Upland						Signed XIII	Date	<u>8-13</u> -2	
Valley						Authorized rep	n eselligit se	<u>^</u>	

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

Form WWC-5