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

WATER WELL RECORD KSA 82a-1201-1215

busine

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

Topeka, Kansos 66620 Fraction Section number Township number Range number County 1. Location of well: NW 1/4 NW 1/4 NE 15 20 21 E/W Negs 2. Distance and direction from nearest town or city: 8 mi. south and 3. Owner of well: Ivan Mc Junkin 3 3/4 mi. east from Bazine, Kansas Street address of well location if in city: R.R. or street: R.R. #1 City, state, zip code: Bazine, Kansas 67516 6. Bore hole dia. 8 in. Completion date 4. Locate with "X" in section below: Sketch map: 7. __ Cable tool __ Rotary __ Driven __ Dug ___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary NW 8. Use: 👱 Domestic ___ Public supply ___ Industry M. __ Irrigation __ Air conditioning __ Stock __ Lawn __ Oil field water __ Other SW --- -9. Casing: Moterial _____ Height: Above or Threaded _____ Welded _____ Surface 14 RMP_____PVC _____IWeight ____ _lbs./ft. Dio. 5 in. to 29 ft. depth Wall Thickness: inches or – 1 Mile -Dia, se is sett, depth gage No. Sch. 5. Type and color of material 10. Screen: Manufacturer's name ___Jet Stream black topseil _ Dia. <u>5*</u> Slot/gouze 1 1/18
Set between 29 1/16 Length 201 29 ft. ond 39 brown clay 49 ft. ond 59 sand (fine to medium) Gravel pack? Yes Size range of material 11. Static water level: yellow clay 25 ft. below land surface Date 12. Pumping level below land surfaces: sandy clay and rock _______ft. after _______hrs. pumping ft. after hrs. pumping yekkow clay 59 Estimoted maximum yield black shale - 400 all 13. Water sample submitted: mo./doy/yr. 🚣 Yes 🌋 No 14. Well head completion: 14_ Inches above grode Pitless adapter . 15. Well grouted? _______ With: Neat cement __ Bentonite ___ Depth: From _____ft. to ____ft. 16. Nearest source of possible contamination:

ft. well direction sement. Type Well disinfected upon completion? _____ Yes _ ____ Not installed Manufocturer's name Model number 9D9P051 HP Length of drop pipe ______ft. capacity ____g.p.m. Type: Murran X___ Submersible _ Turbine ____ Jet Reciprocating (Use a second sheet if needed) Centrifugal Other 18. Elevation: 19. Remarks: 20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Topography: ean Waterhouse Brilling 243 ____ Hill Business name
Henston, Kensas Slope Signed Dear Walnutra Dote 10/3
Authorized representative

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

X__ Upland Valley

Form WWC-5