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			
1 1	County	Fraction		Section	number	Township number	Range numbe	er	
1. Location of well:	nighte son	1/4 1/4 //4		2	7	د ټي	s R 4	8 /₩	
2. Distance and direction from nearest town or city: 1/2 50						WELL SA	MISER		
Street address of well location if in city: 3/4 Wint 6.20 Laws. City, state, zip code: 17							Ks 67	460	
4. Locate with "X" in section below: Sketch map: N FRE WELL						6. Bore hole dia. 35 Well depth 154	 in Completion d 	77	
						7 Cable tool Ro Hollow rod Je			
	- NE					8. Use: Domestic _			
M 1 M 1 M 1 M 1 M M	E I						Air conditioning Oil field water	Stock Other	
sw -	- SE					9. Casing: Materiá	Height: Abo		
<u> </u>						Threaded Welded PVC			
ı→ 1 Mile						Dia			
5. Type and color of mo	aterial			From	То	Diain. to ft. 10. Screen: Manufactur	er's name		
	Ton 3	oi L		0	4	Type TOWNS:			
	$C_{1,\alpha}$	Red		4	33	Slot/gauze	Length	.5- 6	
	SAND +	class		33	37	Gravel pack?	ft, and	1/4 11 ft.	
	C 0	91.		37	4.5	11. Static water level:		mo./day/yr.	
	Class -	BON		45	6 j	12. Pumping level below		-3-77	
	(1)	-600-			72	ft. after ft. after			
	Sang	- First		7 ₂	5	Estimated maximum yield		g.p.m. mo./day/yr.	
	SAN -	2 20 0		-	(Yes _ _ No			
	89 N V	- mad		50	109	14. Well head completion Pitless adapter	n: Inches	above grade	
	CLAY	6,254		09		15. Well grouted? 4	2 Pulled	Concrete	
	()	BLUE	/	25	135	Depth: From ft	. to 24 ft.		
	Clay-	Baron		38	140	16. Nearest source of po	ssible contamination Type		
	SAID-	-FINE		40.	43	Well disinfected upon co	ompletion? Not inst	Yes X No	
	SAND -	med		43	157	Manufacturer's name	estim Land	Volts 4 Sic	
	SHALE	Rod + 6120	~ /	57	154	Length of drop pipe	ft. capacity		
	Cased	154 Pt			,	Type: Submersible		Turbine	
	(Use a second s	sheet if needed)				Jet Centrifugal		Reciprocating Other	
18. Elevation: 19	P. Remarks:					20. Water well contract This well was drilled und		nd this report	
Topography:						is true to the best of my		ef.	
Hill					ć	Business name	es we	License No.	
Slope Upland						Address 202 150	Phones	7, ES	
Valley						Signed Authorize	d representative	Date 27	

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

Form WWC-5