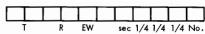
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD KSA 82a-1201-1215



Kansas State Dept. Of Health (Water Well Contractors) Forbes–Bldg. 740 Topeka, Kansas 66620

1 Location of well: Rice	Township name Wilson	Fraction N-WA NW-X	1	n number		1 Town number	Range number 7 - W	
Distance and direction from nearest town or city: 3 miles egot and 3 Owner of well: Ramond Leanard								
Street address of well location if in city: 1/2 north of Salven Address: Lyone Rans, R. 1.								
Locate with "X" in section below:	Sketch map:					II depth: 27 ft. D	ate of completion 10-8	75-
X:::					5	Cable tool Rotary	= = -	
						Hollow rod Jetted : Domestic Public	Bored Reverse rotary supply Industry	
w  ¦¦  E						_	nditioning Commercial	R
!!						ing: Material PVC H	eight: above/below	
S					Dig		/eight _ <b>3</b> _ lbs./ft. <b>_</b> _	
2 Mile			Τ	_		Lin. to Last ft. depth D in. to ft. depth	rive shoe? 🗌 Yes 🕱 No	
(7 , ()	pe and color of material		From	To .	8 Scr Ma	reen: unufacturer Criter	teed	
Sil			0	6	Тур	· Plast Pico	- A A	
clay			6	55	Set	betweenft. and .	The same of the sa	
Sandy			33	83		tings: avel pack 🔀 Yes 🗌 No	Size range of material 14	-
Red Shale	7.00		\$3	87	9 Sto 2	tic water level:  ft. below land surface	Date 10-8-95	]
					10 Pui	mping level below land sur	faces:	
					_	ft. after hrs	pumping g.p.m.	
						imated maximum yield iter sample submitted:	g.p.m.	1
						Yes No Date	-	-
						Pitless adapter 12	Inches above grade	
					×	II grouted? Yes Neat cement Bentoni		9,
		4.				pth: Fromft. to earest_source of possible_co	·	05
					ft.	Direction E	Type #2 12	
					15 Pu	mp:	Not installed	
			<del> </del>		M	anufacturer's name odel number b		7
			-	-	4	ngth of drop pipe f pe:	t. capacity g.m.p.	$ \mathcal{E} $
			<del> </del>	ļ		Submersible Jet [	☐ Turbine ☐ Reciprocating	
	se a second sheet if needed	)				Certrifugal	Other	\ \( \frac{\gamma}{\pi} \)
16 Remarks; elevation					Th	ater well contractor's certificial is well was drilled under m	y jurisdiction and this	
Topography:					rep O	port is true to the best of m	1 4 K	*
☐ Hill ☐ Slope					1	dress	License No.	WW M
Upland Valley					Si	gned Authorized represe	entative Date 10-7	30