WATER WELL RECORD KSA 82a-1201-1215

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

| | | | | |
|---|--------------------------|--|---|-----------------------|
| County Fraction | | on number | Township number Range r | number |
| 1. Location of well: Matherson Stora SE 1/4 SE | 1/4 | 6 | T 21 s R | 4 @ |
| 2. Distance and direction from nearest town or city: 35-21/1/E 3. Owner of well: Locatine Mocesting Inc. | | | | |
| Street address of well location if in city: | | 1 % Stales, Fleche | | |
| | | | Inmon Kous. | 67546 |
| 4. Locate with "X" in section below: Lagrent Sketch map: N | | | 6. Bore hole dia. 8 in. Completion date Well depth 140 ft. 10-7-76 | |
| | | 7 Cable tool XRotary Driven Dug | | |
| NW NE ProcessiNF | | Hollow rod Jetted Bored Reverse rotary | | |
| | | 8. Use: 🗶 Domestic Public supply 🔀 Industry | | |
| W PT - Zondo | | Irrigation Air conditioning Stock | | |
| Per-tods Horney E | | | 9. Casing: Material PCTS Height: Above or below | |
| * * * * * * * * * * * * * * * * * * * | | | Threaded Welded \(\frac{\frac{1}{2} \frac{1}{2}}{2} \) Height: Above or below \(\frac{1}{2} \) Surface in. | |
| s | S Jacobra S Jacobra Well | | RMPPVCWeightlbs./ft. | |
| | | Dia. 5 in. to 31 ft. depth Wall Thickness: inches or | | |
| 5. Type and color of material | From | То | 10. Screen: Manufacturer's name | |
| 7-0'0 | | 2 | sawed slat. | |
| Sop Sail | | 12 | Type | |
| Dark Clays | 2 | 9 | Slot/gauze /16 Length . Set between /30' ft. and | 140' 11. |
| | 9 | 111 | ft. and | ft. |
| Buff Agray Clays Sandy | | 41 | Gravel pack? Size range of mat | |
| Leny Oup 4 Kerner Wofine Sono | Rs 4 | 151 | 11. Static water level:ft. below land surface Date | mo./day/yr. |
| | 5 | 158 | 12. Pumping level below land surfaces: | |
| Eline Claye | | | <u> </u> | ngg.p.m. |
| Hard Bleve Clarge | 58 | 87 | Estimated maximum yield | |
| Buffelaya | 87 | 97 | 13. Water sample submitted: | mo./day/yr. |
| | 90 | | Yes X No Date | |
| Time rook & white cloup | /_/ | 108 | 14. Well head completion: | ches above grade |
| Med sando + granele - Copies | 108 | 143 | Pitless adapter In 15. Well grouted? | ches above grade |
| | , 143 | 3 151 | With: Neat cement Benton | ite Concrete |
| Time to med sands & Float Shalu | | | Depth: From ft. to/ f | |
| Dery has of Bolleup | 151 | 156 | 16. Negrest source of possible contamir ft. <u>308</u> Direction N. NE | nation: Lepstie |
| | | | Well disinfected upon completion? | YesNo |
| | | | 17. Pump: No | t installed |
| | | + | Manufacturer's name | Volts 230 |
| | | | | acity 28 g.p.m. |
| | | | Type: | |
| | | - | Submersible | Turbine Reciprocating |
| (Use a second sheet if needed) | | | Centrifugal | Other |
| 18. Elevation: 19. Remarks: | | | 20. Water well contractor's certification | |
| Mr. Froise will have 5 H Lab poured | | | This well was drilled under my jurisdiction and this report | |
| Topography: Hill Slope 19. Remarks: 19. | | | is true to the best of my knowledge and belief. | |
| - Hill Toe femp nouse. We | | | Business name | License No. |
| Y Upland Pupp in 10 days. | | | Address Active of the state of | אלו ה |
| Valley (Men) Machin. | | | Signed Authorized representative | Date Date |

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

Form WWC-5