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

WATER WELL RECORD KSA 82a-1201-1215

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T	-	₹	EW	sec	1/4	1/4	1/4	No.	

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

	30	Town number Range number 5 W
	ny	Pert At Bailey 0,67501
		4 Well depth: 40 ft. Date of completion - 25
		Well diameterin. 5 Cable tool Rotary Driven Dug
		6 Use: Domestic Public supply Industry Irrigation Air conditioning Commercial
		7 Casing: Material Part Height: above/below Threaded Welded Surface 4 in.
		Digm. Weight lbs./ft in. to ft. depth Drive shoe? Yes XNo in. to ft. depth
From	То	8 Screen: Manufacturer Centented
		Type Plast PVCDia. losn
	20	Slot/gauze 44 Length 20 Set between 46 ft. and 40 ft.
20	35	Fittings: Gravel pack Yes No Size range of material
3.5	40	9 Static water level: 10 ft. below land surface Date 1-25-25
		10 Pumping level below land surfaces: ft. after hrs. pumping g.p.m.
		ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m.
		11 Water sample submitted:
		12 Well head completion: Pitless adapter Inches above grade
		13 Well grouted? Yes No Neat cement Bentonite fr.
		14 Nearest source of possible contamination: ft. 560 Direction 2005 Type
-		Well disinfected upon completion? X Yes 15 Pump: Not installed
	-	Manufacturer's name HP Volts
		Length of drop pipe ft. capacity g.m.p. Type: Submersible Turbine
,		☐ Jet ☐ Reciprocating ☐ Certrifugal ☐ Other
•		17 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.
		Business name License No.
		Signed Authorized representative
	Address: From O 3	From To 0 3 20 20 35

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5