WATER WELL RECORD KSA 82a-1201-1215

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

Coun	County Fraction			Section number		Township number	Range number	
1. Location of well:	Paroner	1/4/18	1/4	/	4	1 22 s	R 15 E	w
2. Distance and direction, from nearest town or city: From Hackium 25 200 73. S-West R.R. or street: Street address of well location if in city: City, state, zip code:						Leward	ton 42 6 257	
4. Locate with "X" in section below: Sketch map:						6. Bore hole dia. 29 in. Completion date Well depth 25 ft. 4-14-77		
NW Z	E					7 Cable tool Rotary	Bored Reverse ro	tary
E SW SE						Irrigation Air conditioning Stock Lawn Oil field water Other 9. Casing: Material Height: Above or below Threoded Welded Surface / 2 in.		
S 1 Mile ————————————————————————————————————						RMPPVCWeightlbs./ft. Dia.//e in. to \$5 ft. depth Wall Thickness: inches or		
5. Type and color of material				From	То	Diain. to ft. dep	th gage No. 78a	
Top sail				0	4	Type		
Brown Clay				4	13	Slot/gauzeft.	ft. and <u>85</u>	.ft.
Srown Clay & Sand			13	38	Gravel pack? Size ra	nge of material 3/4-7/5 mo./day/	<u>2</u> -5 ∕yr.	
Land + graces			16 38	40	12. Pumping level below land	d surfaces:	26	
Sand + gravel				40	85	31 ft. after / hrs. pumping 600 g.p.m. 35 ft. after / hrs. pumping 800 g.p.m. Estimated maximum yield / 400 fg.p.m.		
Gray Clay			85	95	13. Water sample submitted:	mo./day/ Date <u>12 -17-7</u>		
•						14. Well head completion: Pitless adapter	Inches above grade	
					15. Well grouted?	. 3	P	
						16. Nearest source of possible ft. Direction Well disinfected upon complete.	Type OLLW	·// "
						17. Pump: Manufocturer's name W Model number 72311 Length of drop pipe 60	Not installed HP 50 Volts Y ft. capacity 600g.p.	
						Type: Submersible Jet	Turbine	
18. Elevation: 19. Re	(Use a second s	heet if needed)				Centrifugal 20. Water well contractor's	Other] , T
Jopography: — Hill — Slope Seward is a small Community. No address					This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Business name Address Address			
Upland Valley	pink conies to the Department					Signed Authorized rep	presentative Date Form WWC-5	