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

WATER WELL RECORD KSA 82a-1201-1215

Kansas Department of Health ond Environment-Division of Environment (Water well Contractors)

Man	um #1				,	Water well Contractors) Iopeka, Kansas 66620	
1. Location of well	County	Fraction	Section nu	mber	Township number	Range number	
1. Locuiton of wen;	Jaune	NE/4 NE/4 SE	1/4 3 2	2	1235	s R 16 W E/W	
2. Distance and di	3. Owner of well: Steeling Drilling						
Street address of well location if in city: R.R. or street: City, state, ztp coa					erling K	ansas	:
	" in section below:	Sketch map:			6. Bore hole dia.	in. Completion date	7
. ———	N T			ļ	Well depth 6 ft	. 620-11	<u>-</u>
 \\\\			7 Cable tool				
					8. Use: Domestic Public supply Industry Irrigation Air conditioning Stock		
-	`		LawnOil field water Other				
3\\			9. Casing: Martine	Height: Above or below	in.		
	S Mile ————					Weigh 287. B lbs.,	
5. Type and color	From	To	Dia in. to ft.	depth Wall Thickness: inches o depth gage No. 200			
		00		1.5	10. Screen: Manafacturer	's name	_
		Clay	0/	0	Type DV	Dia5	_
		Sandy Olan	1 18 3	28	Slot/gauze	Length	-
		1000	20	40	f	t. and	ft.
		de and	406	10	Gravel pack? Size	mo./day/	yr.
		Trams	704	,,,	ft. below land	surface Dat 6-20-7	<u>Z</u>
					12. Pumping level below I		_
					ft. after	hrs. pumping g.p.	
				-	Estimated maximum yield . 13. Water sample submitte		. 1
					Yes X No	Date	_
					14. Well head completion: Pitless adapter	: Inches above grade	
***					15. Well grouted?	0	
				[With: Neat cement _ Depth: From ft.	Bentonite Concre to ft.	te - 1)
					16. Nearest source of poss		7
					ft Direction _ Well disinfected upon com	• •	No N
					17. Pump:	Not installed	7 ~ ₹
				\dashv	Manufacturer's name Madel number	HP Volts	= }
		\dashv	Length of drop pipe Type:	ft. capacityg.p.r	n. \{		
					Submersible	Turbine	
	(Use a secon	nd sheet if needed)			Jet Centrifugal	Reciprocating	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
18. Elevation:	19. Remarks:				20. Water well contractor		7 1
					This well was drilled under is true to the best of my kr	r my jurisdiction and this report nowledge and belief.	;
Topography: Hill	1			4	Business name / 10	ster Wall	_
Slope					Address Halle	nd Ks 143	<u>" </u>
Upland Valley					Signed Authorized	Spresentative Gate 20	才术
	plue and pink copies to the Departme	ent of Health and Environment		1		Form WWC-5	* I