WATER WELL RECORD KSA 82a-1201-1215

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

1. Location of well:	County	Fraction		Section number		Township number		Range number		
Location of well:	Keno	SW1/4 SW 1/4 NE	51/4	1	2	T	23 5	r 6		
2. Distance and dire	ction from nearest town or city: 2(00 location if in city:	westminste	3. Own R.R. or		1	ing 0.14		lain	Co,	
4. Locate with "X" i	in section below:	sketch map:	City, st	tate, zip o	code:	6. Bore hold	<u>hinso</u>	Completion date		
4. Locale with X h		skeren map:				Well de	pth 25 ft. 9	" <u>tv 7</u>		
NW	NE					Holl	low rod Jetted		verse rotary	
- 1 Mile	X E					_	_ Domestic Pu _ Irrigation Air { Lawn Oi	conditioning S	ndustry Stock Other	
						9. Casing: Threaded	Material Ples	Height: Above or	7 in.	
S I ≼−−−−− 1 M							PVC	Weight	lbs./ft. nches or	
5. Type and color of material					То	Dia in. to ft. depth gage No320				
		,	1	0	41	10. Screen:	Manufacturer's n			
	<u>r</u>	ine grave redium an	21	4	7 25	Type Slot/gauze	· · ·	_ Dia6	0'	
		some clar			<i>4</i> 1-	Set between Gravel pac	ft. a tk? <u>NO</u> Size rar		ft.	
		palls				11. Static	water level: ft. below tent surf	m	o./day/yr. 15-76	
						12. Pumpin	g level below land	surfaces:	5 g.p.m.	
						ft	afterh		g.p.m.	
							sample submitted:	m Date	o./day/yr.	
						14. Well he	ead completion:	12 Inches abov	e grade	
						15. Well gr	routed? VRS			1
							Neat cement n ft. to _	_ Bentonite _X _Z_ ft.	_ Concrete	_1 _1
						ft	t source of possible	Туре		
						Well disinf	ected upon comple	tion? Yes Not installed		_
						Manufactur Model num	rer's name ber	_ HP V	olts	<u> </u>
						Length of d Type:	lrop pipe	_ ft. capacity		Ð
						Sub	mersible	Turbi		I
	(Use a second s	heet if needed)				Jet Cer	ntrifugal	Recip	rocating r	δ. Γ
18. Elevation:	19. Remarks:						well contractor's c vas drilled under my	ertification: y jurisdiction and th		
Topography:	Well in	basema ures from	ent	1			he best of my know	•	· ·	ĭ₽
Hill	all fig	ures from	, 4	2/00	*	Business na Address	RR3 A	latching		
Upland X Valley						Signed	Authorized rep	venterive	.7-26-7	* K * A
	ue and pink copies to the Department	of Health and Environment						Form W		- 1

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