USE TYPEWRITER OR BALL
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WATER WELL RECORD KSA 82a-1201-1215 Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

Form WWC-5

County Fraction Section number Township number Range number 1. Location of well: SG1/4 NE1/4 NE1/4 eno R s Smith 2. Distance and direction from nearest town or city: 3305 Sy camore Street address of well location if in city: 3. Owner of well: FI RR I ickerson Kun R.R. or street: Hntchinson City, state, zip code: 6. Bore hole dia. <u>7</u> in. Completion date Well depth <u>40</u> ft. <u>5</u> <u>30</u> 4. Locate with "X" in section below: Sketch map: 30 Ν 7. __ Cable tool __ Rotary __ Driven 🗶 Dug ____ Hollow rod ____ Jetted K Bored __ Reverse rotary NW ---8. Use: 👗 Domestic ___ Public supply ___ Industry Nile house W E ___ Irrigation ___ Air conditioning ___ Stock 1 Oil field water Other Lawn SW SE Lwell 9. Casing: Material Plas Height: Above or below Threaded _____ Welded Chie Surface _____ septic .lbs ./ft ____Weight_ RMP____ PVC ____ S Dia. La in. to 40ft, depth Wall Thickness: inches or - 1 Mile -1-Dia. ____ in. to ____ ft. depth gage No. _____75 5. Type and color of material From То 10. Screen: Manufacturer's name ______ 3 brown syndy 50 0 RMP Dia. Type 81 Slot/gauze 1/8 hole Length 3 5 40 Set between . __ft. and _ ft. and 54 5 Gravel pack? NO Size range of material mo./day/yr. -30-78 11. Static water level: 9 17 ft. below land surface Date 40 9 12. Pumping level below land surfaces: 15 g.p.m. 71/2 ft. after _____ hrs. pumping hrs. pumping ____ft.after ___ g.p.m. Estimated maximum yield ____OO g.p.m 13. Water sample submitted: mo./day/yr Date Yes 🗶 No 14. Well head completion: 12 Inches above grade Pitless adapter 15. Well grouted? N With: X Neat cement _____ Depth: From ______ ft. to Bentonite _ X__ ft. Concrete W. 16. Nearest source of possible contamination: ft. _______ Direction ______ Type _ Well disinfected upon completion? X Yes No X_Not installed 17. Pump: Manufacturer's name 0 Model number . _ HP _____ Volts \$ _____ft. capacity ______g.p.m. Length of drop pipe _ Type: _____ Submersible ___ Turbine ____ Jet _ Reciprocating Other Centrifugal (Use a second sheet if needed) 18. Elevation: 19. Remarks: 20. 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. Topography: 193 Price Water ____ Hill Business name License No R3 ____ Slope Address 🔏 Javes Upland ATY Date 6 Signed Authorized representati 🗶 Valley

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