USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY,					Z      3      6      SE SW NE 28        T      R      EW      sec 1/4 1/4 1/4 No.		
PRINT CLEARLY.	WATER WELL RECORD KSA 82a-1201-1215				Kansas State Dept. Of Health (Water Well Contractors) Forbes-Bldg. 740 Topeka, Kansas 66620		
1 Location of well: RENO	Township name RENO	Fraction SE/4 X SW/	X NE/4	tion number	23 GW		
Distance and direction from nearest town or city: 1/2 W-1/2 SW OF 3 Owner of well: STEVE ANKER NOLTZ							
Street address of well location if in city: SOUTH HUTCHINON ON 61 Address: RFDI HUTCHINSON, KANSA							
Locate with "X" in section below: Sketch map: N ما المرابع				4 Well depth: <u><u><u></u></u> t. Date of completion <u>2-20</u> Well diameter <u><u>9</u><sup>''</sup> in.</u></u>			
le la				5 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary			
W E WWELL				6 Use: Domestic Dublic supply Industry Irrigation Air conditioning Commercial Test well			
T to rest				7 Casing: Material <b>RMB</b> Height: above/below Threaded Welded Surface in.			
S Septific				Diam. Weight lbs./ft Le_ in. to Le C ft. depth Drive shoe? Yes XNo			
2	ype and color of material		From	To	in. to ft. depth		
TOPSOIL		0	3	8 Screen: Manufacturer <u>JESS &amp; LOWE</u> Type <u>RMB</u> Dia. <u>6</u> Slot/gouze <u>1116</u> Length <u>201</u> Set between <u>40</u> ft. and <u>60</u> ft			
HARD TAN GLAY			3		12		
SOFT LIGHT TAN CLAY			12	. 30	Fittings: Gravel pack 🗌 Yes 🕱 No Size range of material —		
FINE SAND			30	42	9 Static water level: <b>9</b> ft. below land surface Date <b>2</b> -20		
SOFT TANGLAY STREAK			42	43	10 Pumping level below land surfaces: <u>40</u> ft. after <u>1</u> hrs. pumping <u>45</u> g.p.m.		
MED. COARSE GRAVEL			43	60	<u>35</u> ft. after <u>2</u> hrs. pumping <u>15</u> g.p.m. Estimated maximum yield <u>30</u> g.p.m.		
					11 Water sample submitted:		
					12 Well head completion: CAPPED Pitless adapter		
					13 Well grouted? Yes No X Neat cement Bentonite Depth: From J ft. to 3_ft.		
					14 Nearest source of possible contamination: ft. <u>↓00</u> Direction <u>5</u> W Type <u>SEPTK</u> Well disinfected upon completion? Yes □No		
					15  Pump:  Not installed    Manufacturer's name		
(use a second sheet if needed)				Jet Certrifugal Other			
16 Remarks: elevation CUSTOMER TO BUILD SLAB Topography: Hill Slope Upland Valley				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. McLEAN KRILLINAC: 227 Business name Address KEDS HUTCHINSON Signed BILLS HUTCHINSON Authorized representative			

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

Form WWC-5

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6W 28 SE SWNE