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

WATER WELL RECORD KSA 82g-1201-1215 Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

Range number Section number Township number Fraction County 1. Location of well: 3 NW1/4 NW1/4 NE 1/4 т s 6 E(W) 2. Distance and direction from nearest town or city: 1/2 N 1/2 W Whiteside 3. Owner of well: F. H. Warn Ken SW of 1/2 N 1/2 W Whi Street address of well location if in city R.R. or street: RR#1 Hutchinson City, state, zip code: inson Kun. Sketch map: Roud 6. Bore hole dia. 12 in. Completion date 4. Locate with "X" in section below: 5-1-75 Well depth _60_ft. N 7. ____ Cable tool 🔏 Rotary ____ Driven ___ Dug X well ____Bored ___ Reverse rotary _ Hollow rod __ Jetted NW -NF-10450 8. Use: 🗶 Domestic ___ Public supply ___ Industry Mile w F ____ Irrigation ____ Air conditioning ____ Stock ____ Lawn ____ Oil field water Other 9. Casing: Material 1/14.5 Height: Above or below SW SE drivenu 12 Threaded _____ Welded GlaciSurface ____ in. RMP_____ PVC _____ Weight __ ___lbs./ft. ς Dia. 6 in. to 60 ft. depth Wall Thickness: inches or - 1 Mile 1-Dia.____ in. to _____ ft. depth gage No.____75 To 5. Type and color of material From 10. Screen: Manufacturer's name ______ brown top soil 3 Type ______RMP 0 Dia. Slot/gauze 18 4312 Length. 20 run sundy day 3 Set between ______ft. and _ 60 ft. and _ Gravel pack? XES Size range of material YS mo./day/ 11. Static water level: 50 28 ft. below land surface Date 12. Pumping level below land surfaces: <u>15 g.p.m</u>. <u>36</u> ft. after <u>2</u> hrs. pumping _ _____ ft. after _____ hrs. pumping _ g.p.m 70 Estimated maximum yield -_g.p.m. mo./day/yr. 13. Water sample submitted: Yes <u>X</u> No Date 14. Well head completion: 12 Inches above grade Pitless adapter 15. Well grouted? ¥£5 With: X Neat cement _____ Bentonite _____ Depth: From ______ ft. to ______ ft. _ Bentonite __ Concrete 16. Nearest source of possible contamination: road ft. 75 Direction 11 Type ditch Well disinfected upon completion? X Yes No X Not installed 17. Pump: Manufacturer's name _ 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) 19. Remarks: 18. Elevation: 20. Water well contractor's certification: New house to be This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. constructed near Topography: Price Wate ____Hill Business nam well location. Address 🔏 Slope Upland avenn Authorized representation Valley

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

Form WWC-5

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