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

WATER WELL RECORD KSA 82a-1201-1215

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

	County	Fraction		Section number		Township number	Range number	
1. Location of well:	Edwards	1/4 C 1/4 SW	1/4	1	4	T 24 s	R 17 E	
2. Distance and direction from nearest town or city: 4-W 1-1-N of Belore, Ks. east side Street address of well location if in city: 3. Owner of well: R.R. or street: City, state, zip code:					no	V. J. Schartz none Lewis, Ks. 67552		
4. Locate with "X" i		Sketch map:				6. Bore hole dia. 29 in Well depth 78 ft.	. Completion date	
NW	NE						Bored Reverse rotary	
1 Xiie	E E					Lawn O	ir conditioning Stock il field water Other	
S	1					RMP PVC		
1 → 1 Mi 5. Type and color of			· · · · · · · · · · · · · · · · · · ·	From		Dia. $\underline{16}$ in, to $\underline{78}$ ft, dep		
sandy ton	soil					10. Screen: Monufacturer's r		
sandy top soil gray clay				3	6	Type steel Slontonexx 3/16	_ Length 💆 /ı()	
brown clay				6	11	Set betweenft. andftft. andft. Gravel pack?X Size range of material = 3/4, 3/8		
brown & gray clay				11	F	11. Static water level: 12 ft. below land sur	mo./day/yr.	
fine sand & gravel				18	23			
yellow brown clay				23	26	ft. after	rs. pumping g.p.m. 1600+ g.p.m.	
sand & gravel clean coarse loose				26		13. Water sample submitted:		
brown clay	7	7 10. <u>L</u>		77		14. Well head completion: Pitless adapter	inches above grade	
						15. Well grouted? X With: X Neat cement Depth: From ft. to	Bentonite Concrete	
	***************************************					16. Nearest source of possible ftmi Direction _SC Well disinfected upon comple	outh Type gaswell	
						17. Pump: Manufacturer's name Madel number 4-12CM	Not installed Walla Ra HP 50 Volts 460 ft. capacity 1000 g.p.m.	
						Length of drop pipe		
	(Use a second sh	eet if needed)	-			Jet Centrifugal	Reciprocating Other	
18. Elevation:	19. Remarks: 2325	/				20. Water well contractor's c This well was drilled under my is true to the best of my knaw	ertification: / jurisdiction and this repart	
Topography: Hill SlopeX Upland	24 17 1	4 NCX				Rosencrantz—Besusiness name Address Great Bend	1. 1.	

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

Form WWC-5