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

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WATER WELL RECORD KSA 82a-1201-1215

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T	R	EW	sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health (Water Well Contractors) Forbes-Bldg. 740 Topeka, Kansas 66620

										_			
1 Location of well:	ion of well: County Township name Fraction Lakin N SE14,SW14			1 /4	Section 2	n number		Town number T 24 S	Range number R 37 W				
Distance and direction 1/8 mile no Street address of well		ner of well: Charles Hannagan Lakin, Ks. 67860											
Locate with "X" in s					depth: <u>180</u> ft. Do	ate of completion 3–31	75						
								Cable tool Rotary Hollow rod Jetted Domestic Public	Bored Reverse rotar	<u>y</u>			
w				Irrigation Air conditioning Commercial Test well Height: above/sets									
·	S Mile						Thre Dig	welded Some Glued Welded Welded Welded Welded Welder	orface <u>12</u> in. eight lbs./ft				
2	Тур	e and color of material			From	То	8 Screen:						
Top soil					0	1	Mai	nufacturer No scre	een used				
Coarse sa	and				1	10	Slot	/gauze Le between ft. and _	ngth	-			
Fine sa	nd				10	43	Petrofies: 30' Gravel pack X Yes \(\square\) No Size range of material \(\frac{12}{2} \) do						
Gyp					43	55	9 Stat	ic water level: 2_ft. below land surface		1			
Clay				5!	5	65	10 Pumping level below land surfaces: N/A						
Fine sa	nd				65	77	ft. after hrs. pumping g.p.m ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m.						
Clay sa	ndy				77	80	11 Water sample submitted:						
Fine sat	nd				80	99	Yes						
Fine san	d Dirty Tight				99	104							
Gyp rocl	·				104	105	Negt cement Rentonite						
Clay					105	110	14 Negrest, source of possible contamination: House is ft. 2640 Direction West Type						
Sandy C	lay				110	120	Wel	ion? X Yes No					
Sandy c	lay				120	140		nufacturer's nameGo	Not installed 11ds - US Pum	110			
Yealow	clay sandy				140	155	Mod Lens	160	valts volts g.m.p.				
Sandy clean & xx loose coarse						162		Submersible	Turbine Reciprocating				
	(use	a second sheet if needed)						Jet Certrifugal	Other				
16 Remarks: elevati		a; limited wa	ter supp	ly.			This	er well contractor's certific well was drilled under my	jurisdiction and this				
Topography: Hill Slope Upland	B	ROCK 195	į.				Minte Busin	er wilson Dri ers name ress name Authorized represent	lling Co. 208 License No. den City, Ks.	- 1			

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

Form WWC-5

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 ī	?	EW	sec	1/4	1/4	1/4	No.

Kansas State Dept. Of Health (Water Well Contractors) Forbes–Bldg. 740 Topeka, Kansas 66620

	County	Township name	Fraction		Section number			Town number	Range number			
1 Location of well:	Kearny	Lakin	SE¼, SV	1/4	2	21	,	T 24 S	R 37 W			
Distance and direction from nearest town or city: 3 Owner						· E ka	ckxst	Charles Han	nagan			
Street address of well location if in city:						akin,	Ks.	6786 9 =				
Locate with "X" in s			4 Well depth: 180 ft. Date of completion									
			Driven Dug Bored Reverse rotary supply Industry									
w		Irrigation Air conditionin Test well Height: a				nditioning Commercial						
	S 						Threaded Welded Surface in.					
² Page 2	· · · · · · · · · · · · · · · · · · ·	e and color of material			From	То		in. to ft. depth Yes in. to ft. depth				
	sand 10% cla	ay			162	170	Ma	Manufacturer Dia				
Fine	sand 50% clay	with some 2-	3" sands	treak	170 s	180	Slo Set					
	sand 70% cla		•		180	194	Fittings: Gravel pack Yes No Size range of material —					
Coars	e rock				194	195	9 Static water level:ft. below land surface Date					
Yellow			##************************************		195	197	10 Pumping level below land surfaces: ft. afterhrs. pumping g.p.m. ft. afterhrs. pumping g.p.m. Estimated maximum yield g.p.m.					
Blue sh	ale				197	200						
							11 Water sample submitted: Yes No Date					
			, , , , , , , , , , , , , , , , , , , 				1 —	II head completion: Pitless adapter	Inches above grade			
								□ No • □				
							14 Ne	th: From ft. to arest source of possible con	tamination:			
								Direction Il disinfected upon complet				
								nufacturer's name	Not installed			
	No. 110-110-110-110-110-110-110-110-110-110						l	del number H gth of drop pipe ft				
							Typ	-] Turbine			
(use a second sheet if needed)							_	Jet Certrifugal	Reciprocating Other			
16 Remarks: elevation								ter well contractor's certifi s well was drilled under my				
Topography:							ı	ort is true to the best of my	•			
☐ Hill ☐ Slope								ness name dress	License No.			
Upland Valley							l	nedAuthorized represer	Date			