USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY. Kansas Department of Health and WATER WELL RECORD Environment-Division of Environment KSA 82a-1201-1215 (Water well Contractors) Topeka, Kansas 66620 Township number Range number Fraction Section number County 1. Location of well: 34 <u>Reno</u> SW1/4 NE 1/4 NW1/4 24 E т A.A. 2. Distance and direction from nearest town or city: 2 mi N2E Bontrad 3. Owner of well: Rナン R.R. or street: of Haven, Ks. Street address of well location if in city: City, state, zip code: Haven 6. Bore hole dia 4. Locate with "X" in section below: Well depth SC ft. Ν 7. _ Cable tool Kotary ___ Driven __ Dug NX. ____ Bored ___ Reverse rotary ____ Hollow rod ____ Jetted - NE -ı . 8. Use: ____ Domestic ___ Public supply ____ Industry Mile W Е Kirrigation ____ Air conditioning ____ Stock 1 ____Lawn ____Oil field water ___ Other 9. Casing: Material PLSC Height: Above or below SW SE 14 Surface Threaded _____ Welded _____ _ PYC RMP_ Weight lbs./ft S Dia Lin. to L ft. depth Wall Thickness: inches or - 1 Mile -Dia. ____ in. to _____ ft. depth gage No. __ 200 From Τo 5. Type and color of material 10. Screen: Manufacturer's name _ Topsoi'l black Sand + gravel Clay - black + gray Sand - modium - gray T+1 0 RMP Z Dia. Type _ Slot/gauze .030 _ Length _ 2 20 Set between <u>31</u> _ft. and _____ ft. and _ 20 38 Gravel pack? Yessize range of material F-1/24 11. Static water level: mo./dav/vr 38 5/ -5-77 ft. below land surface Date 12. Pumping level below land surfaces: 20 ft. after 12 hrs. pumping 20 g.p.m. _____ ft. after ______ hrs. pumping _ g.p.m. Estimated maximum yield -_g.p.m 13. Water sample submitted: mo./day/yr No Date Yes 14. Well head completion: 14 Inches above grade Pitless adapter 15. Well grouted? Yes With:____ Neat cement ____ Bentonite K Concrete **∂** ft. to **↓∂** ft. Depth: From ____ 16. Negrest source of possible contomination: ft. ______DD Direction ______ Type S.eptite Well disinfected upon completion? ______ Yes _____ No No 17. Pump: Manufacturer's name 3_ Volts 232 Model number _____ ft. capacity 2_g.p.m. Length of drop pipe Submersible Turbine Reciprocating ____ Jet Centrifugal Other (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 to the best of my knowledge and belief. Topography: Miller Water G Hill Slope Address Upland Signed -Valley

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

Form WWC-5

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