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	
1. Location of well:	Fraction SW1/4 SE 1/4SW 1/4	Section n	7	Township number Range number	
2. Distance and direction from nearest town or city: Street address of well location if in city: $\gamma_{\infty}$ 4. Locate with "X" in section below:	2 mi NW of 3. Own	ner of well: r street: state, zip co	R	Antchinson, Ks. 67501 6. Bore hole dia. 10 in. Completion date	
$W = \begin{bmatrix} N \\ I \\$				Well depth    57    ft.    12-4-76      7.    Cable tool    Rotary    Driven    Dug	
5. Type and color of material		From	То	Dia in. to ft. depth gage No 10. Screen: Manufacturer's name	
Topsoil		Ó	2	<u></u> Type <u></u> R <u>M P</u> Dia. <u></u>	
Clay - xiellow		2	33	Stor      Image: Stor	
Clay yellow	+ white rock	33	40	Gravel pack? Gravel pack? Size range of material	
Sand yellow	· - white rock	40	57	11. Static water level: <u>40</u> ft, below land surface Date <u>12-4-76</u>	
Clay ~ light	gray	57	60	12, Bumping level below land surfaces:      12, Bumping level below land surfaces:      12, Bumping ft. after      ft. after      ft. after      hrs. pumping      g.p.m.      Estimated maximum yield      13. Water sample submitted:	
				Yes X No Date 14. Well head completion: Pitless adapter Inches above grade 15. Well grouted?	
				With:Neat cementBentonite _X Concrete Depth: Fromft. toft. 16. Nearest source of possible contamination: See 19	
				ft Direction Type Well disinfected upon completion? <u>X</u> Yes No 17. Pump: <u>X</u> Not installed ~	
				I/. Pump:	
(Use a sec	cond sheet if needed)			SubmersibleTurbine JetReciprocating CentrifugalOther	
18. Elevation: 19. Remarks: Topography: Hill Slope Upland Valley	·			20. 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. <u>Miller Water Well Serv 137</u> Business name Address Hantch n 504 / 5. Signed <u>Authorized representative</u>	

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

Form WWC-5