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 6 Fraction		Section number		Township number	Range number	
1. Location of well: Reno	WE 1/45 E 1/45 E 1/	4 2	3	T 24 s	R 6	E.W
2. Distance and direction from nearest pown pricity: 43/4 mi, 5 of Hury 50 on 17 Street address of well location if in city: 5, 0f Hur din non City, state, zip code: Hur chinson Kan. 67501						
4. Locate with "X" in section below:  Sketch map:			6. Bore hole dia. 12 in. Completion date Well depth 43 ft. 12-13-78			
NW NE			7Cable tool X RotaryDrivenDugHollow rodJettedBoredReverse rotary 8. Use: X DomesticPublic supplyIndustry			
				Irrigation Air conditioning Stock Lawn Oil field water Other  9. Casing: Material		
				Threaded Welded 6/42   Surface in.  RMP PVC   Weight   lbs./ft.		
5. Type and color of material		From	То	Dia. 6 in. to 43ft. de	pth gage No.	
dark	ordwn soil	0	2	10. Screen: Manufacturer's Type RMP	Dia6	<i>,,,</i>
1	* grey clay	2	16	Slot/gauze 1/8 43/6		10 43 ft.
brown		4 16	23	Gravel pack? <b>Yes</b> Size r		1/8-1/24
fine	sand	23	28	11. Static water level:ft. below land so	urface Date <u>/2</u>	mo./day/yr.
brown	clay	28	29	12. Pumping level below lar	hrs. pumping	
fine	29	3/	ft. after hrs. pumping g.p.m.  Estimated maximum yield g.p.m.			
Sano	ly clay	31	36	13. Water sample submitted: Yes No	Date	mo./day/yr.
+1he	Sand	36	37	14. Well head completion: Pitless adapter	12 Inches a	bove grade
brown	shale	41	43	15. Well grouted? 15. Well grouted?		Concrete
rea	Share		13	Depth: From ft. to	le contamination:	
				ft Direction Well disinfected upon comp	letion? X Y	es No
				17. Pump: Manufacturer's name	Not insta	
				Model number		
				Type: Submersible Jet		urbi <b>ne</b> ecip <b>recett V</b>
	a second sheet if needed)			Centrifugal	c	)ther
18. Elevation: 19. Remarks:				20. Water well contractor's certification: This well was drilled under my jurisdiction and the report is true to the best of my knowledge and belief.		
Topography: Hill				Business name	echell	License No.
Slope Upland Valley				Address R 3 Signed Authorized r	A PARTY	-21

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

Fom WWC-5