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	E½ XXX NE 1/4 NW 1/4		1/4	9		т 25 s	R	18	₽₩
6½ miles Southeast of Kinsley, KS Street address of well location if in city:				R.R. or	B. Owner of well: R.R. or street: City, state, zip code:		Roy Lange Route 2 - Box 16 XXX Lewis, KS 67552			
4. Locate with "X" in section below: N					То	6. Bore hole dia. 9 in. Completion date 1/27/79 Well depth 71 ft. 7. Cable tool X Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary 8. Use: Domestic Public supply Industry Irrigation Air conditioning X Stock Lawn Oil field water Other 9. Casing: Material Styne Height Above or below Threoded Welded X Surface 2' XX RMP PVC Weight 1.5 lbs./ft. Dia. 5 in. to 51 ft. depth Wall Thickness: inches or Dia. in. to ft. depth lyall Thickness: inches or Dia. in. to ft. depth lyall Thickness: inches or Dia. in. to ft. depth lyall Thickness: Lowel 1				
Sandy top soil					0	3	M Styrene 20	00ia	5" 20'	
Gray clay					3	15	Set between 51 ft. and 71 ft.			
Sandy clay					15	21	ft. andft. Gravel pack? Yes Size range of materia 3/8-200			
Fine sand & gravel					21	54	11. Static water level: 27 ! 6!! ft. below land surface Date 1/27/79			
Sand & gravel					54	61	12. Pumping level below land	rs. pumpir	ng	
Coarse san	d & gravel				61	71	14. Well head completion: Pitless adapter	Date		_g.p.m. /day/yr.
							15. Well grouted? Yes With: X Neat cement	Bentoni 71 f	iteC	ioncrete
								X No	TypeXYes	No R
							Length of drop pipe Type: Submersible	_ ft. cap	Turbine	
(Use a second sheet if needed)							Jet Centrifugal		Recipro	cating S
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. Clarke Well & Eq., Inc. 185 Business name Address Great Bend, KS 67530 Signed Authorized representative Date				

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

Form WWC-5