WATER WELL RECORD KSA 82a-1201-1215 Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

Section number Township number Range number Fraction County 1. Location of well: 26 SR 13W SF. 1/4.5 т E/W 3. Owner of well: Roger Mc Mananis 2. Distance and direction from earest town or city: R.R. or street: Street address of well location if in city: uka City, state, zip code: Bore hole dia. <u>10</u> in. Completion date Well depth <u>110</u> ft. <u>28 apr 78</u> 6. Bore hole dia. -Sketch map: 4. Locate with "X" in section below: N 7. ____ Cable tool X Rotary ____ Driven ___ Dug 1 ___ Hollow rod ___ Jetted ____Bored ___ Reverse rotary NW -NE-ŧ 8. Use: 🗶 Domestic ___ Public supply ___ Industry Mile w Ε ____ Irrigation ____ Air conditioning ____ Stock - draininge ____Lawn ____Oil field water_____ Other SW -SE 9. Casing: Material ____ Height: Above or below Threaded _____ Welded . Surface ____ 12 in ___ PVC __X lbs./ft. RMP_____ Weight_ S Dia. 5 in. to 20 ft. depth Wall Thickness: inches or 1 Mile Dia. ____ in. to _____ ft. depth gage No. ____ 258 From То 5. Type and color of material 10. Screen: Manufacturer's name Deerler 3 0 Type Dew Slo Soil, sandy Dia. 301 Slot/gauze Length 3 14 Sand. fine Set between . ft. and 100 ft. and 16 28 Clay, tan, sandy Gravel pack? Size range of material. 11. Static water level: 28 37 Sand. fine 37 ft. below land surface Date 12. Pumping level below land surfaces: 37 59 Sand, fine to coarse and gravel _____ ft. after _____ hrs. pumping g.p.m 59 63 Clay, green hrs. pumping ____ ft. after __ g.p.m Estimated maximum yield g.p.m 63 90 Sand, fine to coarse and med. gravel 13. Water sample submitted: mo./day/yr Yes K No Date 90 100 14. Well head completion: Clay, tan and white X Pitless adapter Inches above grade 120 Sand, fine to coarse and med. to coarse gravel 100 15. Well grouted? _ N With:______ Neat cement Depth: From _ ft. to . σ ft 16. Negrest source of possible contamination: ft. ______ Direction ______ Type_ _ Type Scotu Well disinfected upon completion? _____ Yes No D Not installed 17. Pump: Manufacturer's name 3 Model number Ser 20 HP_ Volts Length of drop pipe 100 ft. capacity 25 g.p.m. ≤ğ Type: X Submersible _____ Turbine _ Jet Reciprocating Sec Other (Use a second sheet if needed) Centrifugal 2 19. Remarks 18. Elevation: 20. Water well contractor's certification: 4'x4'x4" slot poured Lelow pitters adapter This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. ₹E Topography: Central W 11 & Pump Svc. 325 Hill Business name Address21_S_Taylor License No. Pratt Ks. SW 1/4 Slope Signed Hoton mut X_ Upland N A Valley Authorized representative

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

Form WWC-5