USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

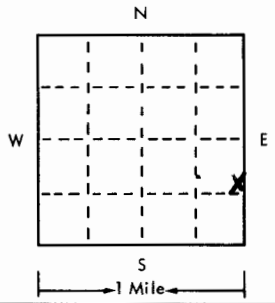
Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well: County: Sedg. Township name: Attica Fraction: SENESE Section number: 8 Town number: 27S Range number: 2W.

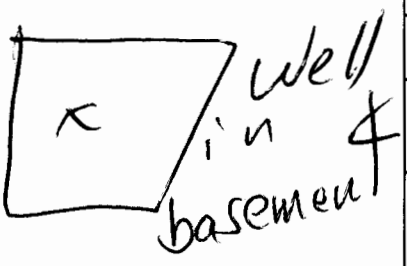
Distance and direction from nearest town or city: 450 1W 3/4So of Colwich KS.
Street address of well location if in city:

3 Owner of well: albert Mies
Address: R#1 Colwich KS. 67030

Locate with "X" in section below:



Sketch map:



4 Well depth: 65 ft. Date of completion 4/26/77
Well diameter 5 in. 11" 4/26/77

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug
☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry
☐ Irrigation ☐ Air conditioning ☐ Commercial
☐ Test well ☐ _____

7 Casing: Material PVC Height: above/below
Threaded ☐ Welded ☐ surface 12 in.
Diam. 5 in. to 65 ft. depth Weight 23 lbs./ft 160
Drive shoe? ☐ Yes ☒ No
___ in. to ___ ft. depth

8 Screen:
Manufacturer Pamplico MPI
Type PVC Dia 5 in
Slot/gauze 1/16 Length 5 ft
Set between 60 ft. and 65 ft.
Fittings:
Gravel pack ☒ Yes ☐ No Size range of material 3/8

9 Static water level:
18 ft. below land surface Date 4/26/77

10 Pumping level below land surfaces:
18 ft. after 1/2 hrs. pumping 30 g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 50 g.p.m.

11 Water sample submitted:
☐ Yes ☒ No Date _____

12 Well head completion:
☐ Pitless adapter ☒ 12 inches abave grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 2 ft. to 18 ft.

14 Nearest source of possible contamination:
ft. _____ Direction None Type _____
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length af drop pipe _____ ft. capacity _____ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Recipracating
☐ Certrifugal ☐ Other

2 Type and color of material	From	To
Top Soil.	0	6
Clay	6	18
fine sand	18	24
Clay	24	28
med. sand -	28	48
black shale & Gray shale	48	65

(use a secand sheet if needed)

16 Remarks: elevation

Topography:
☒ Hill
☐ Slope
☐ Upland
☐ Valley

17 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.
Business name _____ License No. 318
Address Colwich
Signed _____ Date 4/26/77
Authorized representative

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

27 2W 8 SENESE

677-H