WATER WELL RECORD KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

1,	~~	E+i		l carre		Taumahin number	Panas au-L	
	County Fraction Location of well: Kingman ne , ne		Section number 29			Township number	Range number	
		ne ne s	_	2.5		T SO S	R 7W E/W	
2. Distance and direction from nearest town or city:					l:	Ellas Flokne	r	
Street address of well location if in city: 5s Kingman					4 .	Kingman, Ks.		
4 1 - 11 11 11 11		CL . I	City, s	tate, zip o	code:	I	6-1-1-1-70	/10 /r
4. Locate with "X" in se	ection below:	Sketch map:				6. Bore hole dia. 92 ft.	. Completion date	/ 18 / /
· [] []						7. Cable tool X Rotary	Driven Dug	
						Hollow rod Bored Reverse rotary		
						8. Use: X Domestic P	ublic supply Indu	istry
<u>*</u> w	<u> </u>						ir conditioning Stoc	
sw	- SE					Lawn C	il field water Oth	
	-					7. Casing: Material Threaded Welded		
S						RMPPVC	Weight	lbs./ft.
1 Mile	I					Dia. 4n. to 92ft. der	th Wall Thickness: inch	nes or
5. Type and color of material				From	То	Dia in. to ft. depth gage No		
						Deorless 10. Screen: Manufacturer's	name	
		-clsy	,		14	Type DWC	_ Dia 4	
						Slot/gauze •035 Set between 57	Length — 10	
		fine sand		14	24	ft.	and	ft.
clay fine sand m#d*### clay			24	25	Gravel pack? X Size range of material 5dn 11. Static water level: mo./day/yr. 30 ft. below land surface Date 12/18/76			
			24	20				
			25	32	12. Pumping level below land surfaces:			
					ft. after hrs. pumping g.p.m			g.p.m.
				32	3 5	ft. after hrs. pumping g.p.m		
			_			Estimated maximum yield		g.p.m.
		clay med sa	nd	35	60	13. Water sample submitted: Yes X No	mo./ Date	day/yr.
	-clex	ARRESERA		60	62	14. Well head completion:		
	<u> </u>	MEO OL II D OESTO			02	Pitless adapter	Inches above gr	rade
	med sand	C社会学术		62	69 69	15. Well grouted? X		
						With: X Neat cement	Bentonite Co 1.5ft.	oncrete
	clay	是全部自治療教会也自治自 公	n el	69	84	16. Nearest source of possible		
The state of the s		fine white ser	~ d	0.4	00	ft Direction	Туре	
		fine white sar	uu	84	92	Well disinfected upon comple		No
						17. Pump: Manufacturer's name	Not installed	
						Model number	HP Volts	
							ft. capacity —5—	g.p.m.
						Type: Submersible	Turbine	
						Jet		ating
(Use a second sheet if needed)						Centrifugal	Other	8
18. Elevation: 19.	. Remarks:					20. Water well contractor's		
						This well was drilled under m is true to the best of my know		eport
Topography:						IVman Sr	s14(\$
<u> </u> HiII						Business name	e Licer	ise No.
Slope Upland						Address VI A	<u></u>	-4-1
Valley						Signed Authorized rep	resentative Date -	
	and ainly agains to the Door	nent of Health and Environment					Form WWC	