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

I - IV	<u> </u>			,
County Araction	Section		Township number	Range number
E 1/4 SE 1/4 SE 1/4	1 7		1 295	s - 36 W
2. Distance and direction from nearest town or city:	Owner of well	1: K	ex Coleman	
2. Distance and direction from nearest town or city:  5 ml 5 Ellysses  R. I treet address of well location if in city:  4 E - 25 - 8 h 4 ulysses  Cit	R, or street: ry, state, zip	K./ code:	ulyses 124	67880
Locate with "X" in section below: Sketch map:			o. boge hole dia.	in. Completion date
` N			Well depth 330 ft.	
			7 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary	
		l		Public supply Industry
W			Irrigation	Air conditioning Stock Oil field water Other
SW SE		ŀ		C Height: Above or below
<u> </u>			Threaded Suc Welded	iSurfacein.
S 1 <del></del> 1 Mile			PVC <u>54</u>	tepth!Wall Thickness: inches or
5. Type and color of material	From	To	•	lepth gage No. 1262
	+	a .1		s name <u>Jet Stream</u>
yana.	0	20	Type P.V.C	
Clay	30	32	Slot/gauze_5.10+ Set between270 '	Length <u>60</u> ft. and <u><b>330</b></u> ft.
Clay w sand strip	220	260	ft Gravel pack? <u>√e</u> ≨ Size	andft.
) me Oa wal		7	11. Static water level:	mq./day/yr.
A A A		295		surface Date
- O Clay	393	302		hrs. pumpingg.p.m.
Coarse sand	30 5	315	ft. after Estimated maximum yield _	_ hrs. pumping g.p.m.
Landstone	3,5	330	13. Water sample submitted	
			Yes No	Date
			14. Well head completion: Pitless adapter	
			Well grouted?	
			With: Neat cement _ Depth: From ft.	Bentonite Concrete
			Nearest source of possi	
			Well disinfected upon com	Type
		$\vdash$	17. Pump:	Not installed
			Manufacturer's name Model number	HP Volts
				ft. capacityg.p.m.
			Type: Submersible	Turbine
			Jet	Reciprocating
(Use a second sheet if needed)			Centrifugal	Other
8. Elevation: 19. Remarks:			<ol> <li>Water well contractor</li> <li>This well was drilled under</li> </ol>	s certification: my jurisdiction and this report
opography:			is true to the best of my kn	· · · · · · · · · · · · · · · · · · ·
opograpny:			Business name	License No.
√ Slope			Address — Address	160
Upland   Valley			Signed Authorized	epresentative Date
- I				