## WATER WELL RECORD KSA 82a-1201-1215

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

County	Fraction		number	Township number	Range number	
1. Location of well: HARPER	NW 1/4 NO 1/4 ND 1/4	/		т 31 s	$R 7 \omega_{E/W}$	
2. Distance and direction from nearest town or city:		vner of wellor street:	11: F	10YD BAR	KER	
Street address of well location if in city:			code: /	FAPER R	1 Ks -	
4. Locate with "X" in section below:	Sketch map:			6. Bore hole dia ir Well depth 2 ft.	. Completion date	76
	50 W			7 Cable tool Rotary	Driven Dug	1
NW NE	# 100 Shop	7		Hollow rod Jetted	Bored Reverse rotary	-
W I I E	PIT			8. Use: Domestic F	Public supply Industry Air conditioning Stock	
-	(gaNO PIT)			Lawn C		-
				(9) Casing: Material Height: Above or below Threaded Welded Surface in.		
S 1 Mile				RMPPVC_	Weightlbs./ft. pth Wall Thickness: inches or	
5. Type and color of material		From	То	Dia in. to ft. de	oth gage No. 182	-
	Gaild Camp	6	3	10. Screen: Manufacturer's		
	SOILY SAND	5	10	Type PVC Slat/gauze 035	Dia	
	<u> </u>	1	<del>'</del>	Set betweenft.	_ft. andft.	
	5,174 SAND	10	20	Gravel pack	ange of material 5 pm	
	MED SAND	٥٥	40	11. Static water level:ft. below land su	irface Date 6-4-96	
				12. Pumping level below lar	d surfaces:	
				ft. after ft. after		
				Estimated maximum yield — 13. Water sample submitted:	g.p.m. mo./day/yr.	}
		+		Yes No	Date	
				14. Well head completion: Pitless adapter	15 Inches above grade	
				15. Well grouted?		4
				With: Neat cement	Bentenite Concrete ft.	] - <b>U</b>
				16. Nearest source of possib	le contamination: SAND	1
				Well disinfected upon compl	etion?YesNo	1
				17. Pump: Manufacturer's name	Not installed	~¦`
				Model number 3548	HP 5 Vols 30	[ {≷
				Туре:		1
		-		SubmersibleJet	Turbine Reciprocating	
(Use a secon	d sheet if needed)			Centrifugal	Other	\* \
	2 to Jet				ny jurisdiction and this report	'
Topography:  Topography:  Topography:  Slope  Topography:  Topography:	, - ,			is true to the best of my know	wledge and belief. 140	]
Slope 3 AB				Business name	License No.	
Upland				Signed W N Ly M	presentative Date	E.
Valley  orward the white, blue and pink copies to the Departme	nt of Health and Environment		. :	AUJUSTIZED FO	Form WWC-5	4