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

WATER WELL RECORD KSA 82a-1201-1215

| | _ | _ | | | _ | | _ |
|--|---|----|-----|-----|-----|-----|-----|
| | | | | | | | 1 |
| | 2 | EW | sec | 1/4 | 1/4 | 1/4 | No. |

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

| | County | Township name | Fraction NE 1 NE 1 | | Section number | | | Town number | Range number | | |
|---|-----------------------------|---------------------------|--------------------|---|------------------|------------|--|--|-----------------------------|--|--|
| 1 Location of well: | Barber | Nipewalla | | | | | | 33 | 11 | | |
| Distance and directi | on from nearest town or cit | yd Forrestor | | | | | | | | | |
| Street address of well location if in city: Address: | | | | | | | Hazelton, Ks.67061 | | | | |
| Locate with "X" in s | | | | 4 Well depth: ft. Date of completion Well diameter in. | | | | | | | |
| w | | | | 5 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary 6 Use: Domestic Public supply Industry Irrigation Air conditioning Commercial Test well | | | | | | | |
| | | | Thre Dia | Casing: Material Height: above/below Threaded | | | | | | | |
| 2 | Туре | e and color of material | | | From | То | 8 Scr | _ in. to ft. depth | | | |
| | | tes | t. #1 | | | | | nufacturer | | | |
| | | | soil | | 1 | 5 | Slo | Type Dia . Slot/gauze ft. and ft | | | |
| shale | | | | | | 72 | | Fittings: Gravel pack Yes No Size range of | | | |
| | | , | | | | | | 9 Static water level:ft. below land surface Date | | | |
| test #2 so%1 | | | | | | 9 | | 10 Pumping level below land surfaces: ft. after hrs. pumping | | | |
| clay | | | | | | 1 8 | _ | pumping g.p.m. | | | |
| red shale | | | | | | 62 | 11 Water sample submitted: Yes No Date | | | | |
| | | | | | | | 12 Well head completion: Pitless adapter Inches above gra | | | | |
| These tests dry and plug | | | | | | | | □ No e □ — ft. | | | |
| | | | | | tamination: Type | | | | | | |
| | | **** | | | | | 15 Pum | | Not installed | | |
| | | | | | | | Мо | | P Volts | | |
| | | | | - | | | Len Typ | gth of drop pipe ft e: | . capacity g.m.p. | | |
| | luro | a second sheet if needed) | | | | | | | Turbine Reciprocating Other | | |
| 16 Remarks: elevation | | | | | | | | er well contractor's certifi | cation: | | |
| Topography: Hill Slope | | | | | | | T.V. Busi Ada | well was drilled under my ort is true to the best of my man rcs ness name dress Wedicine | knowledge and belief. | | |
| Upland Valley | | | | | | | 51gi | Authorized represe | frafive | | |

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

Form WWC-5