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

WATER WELL RECORD KSA 82a-1201-1215

П		Γ	
T	R	EW	sec 1/4 1/4 1/4 No.

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

					ropeka, Kansas 66620	
County Township name Fraction	Sect	tion numbe		Town number	Range number	7
1 Location of well: ROOKS N. PLAINVILLE SEY SEY S	EX	8		T-9-5	18-18-W	
Distance and direction from nearest town or city: DL 171 NVIIIE 3	Owner of we	ılı:	· R	WILKEN	SON	1
Street address of well location if in city: 5 MILE North West	Address: R	711	PL	HINVIIIe	X 17NS 67663	?
Locate with "X" in section below:  N			4 Wel	I depth: 45 ft.	Date of completion 7/7-	18
				l diameter in. Cable tool [X] Rotary		-
				Hollow rod Jetted	Bored Reverse rotary	4
W			6 Use:		lic supply	1
				ng: Material PLASTK eaded Welded [		
S			Dia	m .	IWeight   Ibs /ft	
2 Table 4 Tab		Τ		– in. to 🎢 ∰ ft. depth – in. to —— ft. depth	Drive shoe? Yes No	
Type and color of material	From	То	Scre	en: Nolve Luse	a Per RORATE	*
(LA)	U	4	Mar / Type	nufacturer Coz	Dia	
SHND	4	25	Slot Set	/gauze <u>/16</u> between <u>32</u> ft. and	Length St. Fl. 12/	
White CLAN	25	37		ngs: vel pack 🄀 Yes 🔲 No	Size range of material	E HAST
RLUE CIFY	37	44	O C+~+:	c water level:  ft. below land surface	- *	
Blue Stiple	44	45				40
		1 3	31	ft. after hrs ft. after hrs	rfaces: 4.25 5. pumping g.p.m. 5. pumping g.p.m.	Pres
141N/22 - 1411/ 5 1 - 1 - 1		1 - 10	E-4:		₹ g.p.m.	Leci
OWNER - WILL SELMIT WATE	R S A	pre	11 Wate	er sample submitted: 'es 🎾 No Dat	te	
& COMPLETE Well TOSTATE RE	gaire	me NTS		head completion: litless adapter	1 nches above grade	0
				grouted? XYYes	□ No	
			Dept	h: From ft. to	10 130-5ft.	2
				est source of possible co	ontamination: NONE	2
				disinfected upon compl	etion? 🛛 Yes 🔲 No	-
			15 Pump Manu	: Jfacturer's name	Not installed	
			Mode	el number		$ \mathcal{A} $
			Leng Type		ft. capacity g.m.p.	
			_	ubmersible let	Turbine	4
(use a second sheet if needed)			= -	ertrifugal	Reciprocating Other	W
16 Remarks: elevation				r well contractor's certif		W
-				well was drilled under m t is true to the best of m	y jurisdiction and this y knowledge and belief.	-10
Topography:			JEWE	es Bros Water	Nell DAYSER 28	5K
Slope			Addre	ess name	RRP2 License No.	•
☑ Upland ☐ Valley			Signe	Authorized represe	ntative Date	7

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

Form WWC-5