244

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

WATER WELL RECORD KSA 82a-1201-1215

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		Γ	777	Т	
				Ц.	Щ
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

•	,						-p,
County Township name	Fraction		l	on number		Town number	Range number
Leavenworth	SW4 Sul					10 5	
Distance and direction from nearest town or city: $3.5E$	5 N	3 Owner	of well	·Wi	HIA	n E. Nev	/
Street address of well location if in city: OF JARblo		Addre	ss: R	R3	Box	490 Leave	enworth, Ko
Locate with "X" in section below: Sketch map:	اام			Program in a	4 Wel	1 depth: ft. [Date of completion
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						Cable tool Kotary	PPT- 30-79
\hat{j}							Bored Reverse rotary
V	use 7					: Domestic Publi	
W X $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$					0 000	<u>-</u>	onditioning Commercial
1. 5.	110					ing: Material PVC	
				į		eaded Welded i	Surface 21 in. Weight 21821bs./ft:258
Mile Mile				1			Drive shoe? Yes No
2 Type and color of material			From	To	_	_ in. to ft. depth	
TOP SOIL				2		nufacturer Pump	
TOP SOIL			Ü	3	Typ	/gauze _020	Dia
Clay			3	28	Set	betweenft. and	\$2. ft
Fine Sand, Course SAND, 9 Shale gray	Wavel		28	38	Fit: Gro	tings: avel pack Yes No	.030 X,060 Size range of material
Shale gray			38	70	9 Sta	tic water level: Eft. below land surfac	9-30-79 e Date
SANDY Shale			70	100		nping level below land su	
						ft after hrs	. pumping g.p.m.
				 		mated maximum yield -	, ,
undbruterist - Buy.						ter sample submitted:	
					12 14	Yes No Dat	P
						Pitless adapter 24	
				ļ	13 We	Il grouted? Yes	□ No
						Neat cement Benton oth: From ft. to	15 ft
					14 No	west source of possible of	nteniesties
					ft.	Direction	Jype 571
				┿	15 Pur	ell disinfected upon compl	etion? Yes No
					Mo	inufacturer's name	
						odel number	HP Volts ft. capacity g.m.p.
				 	Ty,		ir. capacity g.m.p.
					_	Submersible	Turbine
(use a second sheet if neede	d) .				_	Jet Certrifugal	Reciprocating Other
16 Remarks: elevation						iter well contractor's cert	ification:
972					ı	s well was drilled under n	, ,
Topography:	clah				rep < 7	port is true to the best of r	Co Inc 182
Hill Car	2(40)				Bus	iness name	License No.
☐ Slope ☐ Upland						Idress Hollon.	Jonn Dat 10-7-79
Valley					319	Authorized repres	entative

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

BR = 044 7= 066

Form WWC-5