240

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

T R EW sec 1/4 1/4 No.

WELL RECORD Kansas State Dept. Of Health

WATER WELL RECORD KSA 82a-1201-1215 ABB

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

	County	Township name	Fraction	1/-	Section	on number		Town number	Range number		
Location of well:	Shawnee	Township hanc	NWN	WNE	1	4		T13S	R14E		
stance and directi	on from nearest town or ci	ly:	770 77	3 Owner		:					
treet address of we	Addre	ess:T)	Ran	dal	, Terry	www Kongog					
		Sketch map:			nu	raı			urn, Kansas		
ocate with "X" in s				4 Well depth: 33 ft. Date of completion $11/2$ Well diameter 10 in.							
	; ; X ;							Cable tool Rotary			
	 							Hollow rod Jetted See: Domestic Publi			
w	E							☐ Irrigation ☐ Air c	onditioning Commercial		
	!						\sqrt{c}	asing: Material Stee	Height: above/below		
<u> </u>							/ `i	hreaded Welded X			
	S Mile							in. to			
	Тур	e and color of material			From	То	-	in. to ft. depth	· ·		
						_		creen: Manufacturer <u>Steel</u>	Pipe & Supp		
Top Soil					_0_	2_	1 5	ype <u>Steel</u> Not/gauze <u>* hole</u> l	Dia. <u>6-5/8</u>		
Brown Clay with Fine Sand						12	S	et between 22\$ft. and	_ 30 ft		
Brown Clay with sand and gravel						30		ittings: Gravel pack ሺ Yes 🗌 No	Size range of material 🌲		
Blue			30	33		tatic water level:	. Date 11/21/75				
					,,,			umping level below land sur			
								ft. after hrs ft. after hrs			
							E	stimated maximum yield —	20 g.p.m.		
								Vater sample submitted: Yes 🔣 No Dat	e		
							1 -	Vell head completion:			
						Pitless adapter Inches above grade 13 Well grouted? X Yes No					
								Neat cement Bentonite Depth: From Oft. to 10 ft.			
							14 1	Nearest source of possible co	entamination:		
								t. 125 Direction We Well disinfected upon compl	st Type Sept etion? Yes No		
							15 P		Not installed		
								Manufacturer's name	HP Volts		
							۱ ا	ength of drop pipe			
							1 -	ype: Submersible	Turbine		
	luse	a second sheet if needed)						Jet Centrifugal	Reciprocating Other		
Remarks: elevat) v	Vater well contractor's certi	fication:		
1088 p.		e installed	l b y cu	stome	er			his well was drilled under me eport is true to the best of m			
Hill							Ē	usiness name	License No.		
Slope Upland							1	Address	Date		
Valley							Ι,	Authorized representation			

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

11-28-79 This may have been dilled by Cummings- which no longerdrille wells.