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

WATER WELL RECORD KSA 82a-1201-1215

							ш
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

					r			T	T	1
1 Location of well:	County	Township name	·		Section number		225 6		Range number	
	CHASE	NWSWNW							6E	
Distance and directi	on from nearest town or cit	v: 2E, 3/4N of	<u>-</u>					n Rodger		
					ess: Ccader Point Ks RR 66843					
Locate with "X" in section below:  N							4 Well depth: 96 ft. Date of completion 4/4 Well diameter 10 in. 1976			
	1 1 1							Cable tool Rotary Hollow rod Jetted	Driven Dug  Bored Reverse rotary	
	1							: Domestic Public		
w  - 1-	·¦}						Irrigation Air conditioning Commercial			
							7.6	□ Test well □ □ □ Ing: Material PVC H	oight Charles	-
Creek								eaded Welded S	urface $\mathbf{Z}\mathbf{\mathcal{H}}$ in .	
	S Mile						Dia	im. Zin. to <b>26</b> ft. depth!0	Veight lbs./ft Prive shoe? ☐ Yes      No	
2		e and color of material			From	То		in. to ft. depth		
					0	4	8 Scr Ma	een: nufacturer <u>5 10 7</u> ne <u>5 10 + PVC</u> 0	Pert Certainte	el
CH Red Brn Lime + Shale Cream Gray 120.					4	35	Sig	gauze <u>18 X 6 "</u> L	ength	
		3/40/01WT	35.5				Fitt	between <u>24</u> ft. and . rings:	4	
LIME	Soft wit	n Shale p	antings	·	35			avel pack 🗌 Yes 🗶 No :	Size range of material —	-
Shale	Gray Si	)ty			45	47		fic water level:  oft. below land surface	Date 4/5/76	
Lime Hand					47	50	10 Pun	nping level below land surf		
Shali	e Lt Gr	34			50	58			pumping g.p.m.	
Lime Hard Gray Chert Noducis					<u>58</u>	65	11 Wa	ter sample submitted:		1
	4 Shale G			+	65	80	12 We	Yes XNo Date	_	1
	45hale Cr	•		- 1	80	84			Inches above grade ☐ No	┨
١,	tshale M	_			84	96	<b>☆</b>	Neat cement Bentoni	te	,
	c H20 58-		5.1. 4/4	HAL			<u> </u>			1
, , , , , ,	C HOU SO	0 1 0.00	17 1	7 7 1			ft. We	11 disinfected upon comple	ntamination: <u>utuwe</u> stype <u>Septic</u> tion? XYes \[ \] No	1 ′
			*				15 Pun		Not installed	1
								nufacturer's name del number h	IP Volts	Ι,
							-1	ngth of drop pipe f	t. capacity g.m.p.	'
							Typ	_	Turbine	1
	(ura	a second sheet if needed)						Jet [ Certrifugal [	Reciprocating Other	
16 Remarks: elevat	·			L				ter well contractor's certif		1
	Located	on uplan	d Fla	t				s well was drilled under my	•	'
Topagraphy:							report is true to the best of my knowledge and belief.  MENCE Dnilling 203			
M Hill □ stars						1	iness name dress Cottonu	pood Falls KS		
☐ Slope ☑ Upland								Authorized represe	Date 4/20	
☐ Valley								Authorized represe	1976	J

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

Form WWC-5