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

WATER WELL RECORD KSA 82a-1201-1215

BCC

	?	EW	sec	1/4	1/4	1/4	No.

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

							Topeka, Kansas 00020
County 1 Location of well:	Township name	Fraction			,	Town number	Range number
ATChison		Suky Suk		22		6	17
Distance and direction from nearest town or city	,	•		RT	who	ence Mul	ray
Street address of well location if in city:	JSCOTAN		Address:		COT.	ah, Kansa	5 66058
Locate with "X" in section below:	Seftic					ell depth: <u>70</u> ft. ell diameter <u>12</u> in.	
1 1 1	7	Trailor Future 5			5	Cable tool Rotary	Driven Dug
ii		6 Use: Domestic Public supply Industry					
w E	1,00						conditioning Commercial
N	1 1				7 C	asing: Material PVC	Height: abov/below
<u> </u>		Threaded Welded Surface 21 in. Diam. Weigh 22 lbs./ft25					
1 Mile	X we	<u> </u>			_	in. to ZO ft. depth	Drive shoe? 🗌 Yes 🔲 🗸 🗸 🗸
2 Туре	and color of material		Fro	om To	8 50	in. to ft. depth	
TOP SUIL			C	9	1 _	lanufacturer Lump	. Dia
Clau bhound			4		S	ot gauze .0.20 et between _60 ft. an	Length 10
Em Cut					7	ittings: ravel pack Yes N	•
FINE SILT			70				
Fine sand Course san	d, gravel		4	7 70		ft. below land surfa	ace Date <u>8-3-</u> 79
						umping level below land s ft. after h	urfaces: rs. pumping g.p.m.
A STATE OF THE STA					l _		rs. pumping g.p.m.
						ater sample submitted:	
						Yes No Divided the No Divided Head completion:	
					<u> </u>	Pitless adapter 24	Inches above grade
						ell apouted? Yes Neat cement Bento	No onite
					D	epth: From _ D _ ft. to	10_ ft.
					ft ft	learest source of possible . LOO Direction —	1ype 2 2 7 7 7 9
					<u></u>	/ell disinfected upon com	Dot installed
						Nanufacturer's name	
	-						HP Volts ft. capacity g.m.p.
					T ₂	ype: Submersible	☐ Turbine
_					1 [_ Jet	Reciprocating
(use of	a second sheet if needed))				Certrifugal dater well contractor's cer	tification:
990					т	his well was drilled under	my jurisdiction and this
Topography: OWNEY TO	INST411 9	slab			51/2	nder DRlg	my knowledge and belief.
☐ Hill ☑ Slope						usiness name	K5 License No.
Upland					1	igned On le R	parte sentative

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

Form WWC-5