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

WATER WELL RECORD KSA 82a-1201-1215



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

1 Location of well:	Township name	Froction AENE	Section number			Town number	Range number		
Distance and direction from nearest town or cit				of well:	10	55	beach.		
						s, Kansas			
Locate with "X" in section below: Sketch map:						4 Well depth: 63 ft. Date of completion 162 well diameter 24 in.			
w E							: Domestic Public	Bored Keverse rotary	
1						7 Casing: Material A Height: above/below Threaded Welded Surface 20 in. Diam. Weight 39 lbs./ft. // in. to 40 ft. depth Drive shoe? Yes No.			
2 Туре	and color of material			From	То	8 Scre	in. toft. depth		
Elay				0	10	Manufocturer The Associa C File III III III III III III III III III I			
Sand & ghave ((Brown)				10	26				
24 Blue MUL				76	H/	Gra	ings: ivel pack 🗗 🕫 🗌 No 🤅	ize range of material —	
Mod GRAVEL	1 5and		•	111	58		jc water level: ft. below land surface	Date 9-16-7-1	
Alve Shale				58	10	10 Pumping level below land surfaces: Let ft. after hrs. pumping Stag.p.m. Let ft. after hrs. pumping Stag.p.m. Estimated maximum yield State g.p.m.			
							er sample submitted:		
						_		Inches above grade	
						Z	l grouted? 		
						14 Nearest source of possible contain ft. 13 64 Direction 466 Well disinfected upon completion	CAT Types of		
						15 Pum Mar	nufacturer's name	Not installed	
						Len	del number 644 H gth of drop pipe 22 ft	P ZS Volts g.m.p.	
						тур. 	Submersible [Torbine Reciprocating	
(use a second sheet if needed)						Certrifugal	Other		
16 Remarks: elevation Topography: ☐ Hill ☐ Slope ☐ Upland ☑ Yolley					17 Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Business name License No. Address Signed Authorized representative				

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

Form WWC-5