USENTYPEWRITER OR BALL OF DECIDENT OF DECI	aЦ		
USE TYPE WRITER OR BALL POINT PEN-PRESS FIRMLY, 24 DEC 1974			T R EW sec 1/4 1/4 1/4 No.
PRINT CLEARLY. WATER WELL RECKSA 820-1201-1 HEALTH DA			Kansas State Dept. Of Health (Water Well Contractors) Forbes-Bldg. 740 Topeka, Kansas 66620
1 Location of well: Township name Fraction NE 14 NW	1/4 Section 1		Town number Range number 21 West
Distance and direction from neglest town or city: From Ellis 3 Owner of well: World armbuster Sent address: 1200 Catton wood St			
Ellis, Kansas 67637			
Locate with "X" in section below: Sketch map: 4 Well depth: 54 ft. Date of completion//-25-74 N Well diameter 10 in.			
			5 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary
W			6 Use: Domestic Public supply Industry Irrigation Air conditioning Commercial Test well
S Mile			7 Casing: Material Plante Height: above/below Threaded Welded Surface 13 in. Diam. Weight lbs./ft
2 Type and color of material	From	То	in. to 54ft. depth Drive shoe? Yes No in. to 54ft. depth 200-135-firship
Black Dist + Rach wellow	0	28	8 Screen: Manufacturer Desa & Lowell Styrence Type Plastic Dia. 5"
Red M-Fire Sound & Olym CRhue		32	Slot/gauze Length
Cam M-Fine Sand + Stovel (14-3/6!		53	Fittings: Gravel pack Yes No Size range of material
Blue Shale	53 5	54	9 Static water level: 30 ft. below land surface Date 1/1 - 25 - 74
BRUCK 53'		7	10 Pumping level below land surfaces:
53 30			ft. after hrs. pumping g.p.m g.p.m.
23'141 213'5			Estimated maximum yield g.p.m. 11 Water sample submitted:
232			Yes No Date 12 Well head completion: 12 Pump House
2			Pitless adapter Inches above grade
			13 Well grouted? X Yes No
23: sat thick - Frobabb Og (right			Depth: From 10 ft. to 15 ft. 14 Nearest source of possible contamination: ft. Direction Na Type Success
ontact) - in Allynum			ft
			15 Pump: Not installed Manufacturer's name
	<u> </u>		Model number HP Volts Length of drop pipe ft. capacity g.m.p.
7817-27-3			Type: Submersible Turbine
(use a second sheet if needed)			Jet Reciprocating Certrifugal Other
Topography: Hill Slope Supland Valley	I		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 Address 3 Maria License No. Signed Authorized representative
Forward the white, blue and pink copies to the Kansas State Dept. Of Health.			Ellis, 172, Form WWC-5