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

## Jub 4. 23 &

WATER WELL RECORD KSA 82a-1201-1215 Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

	County	Fraction		Section number		Township number	Range number	7	
1. Location of well:	SALINE	1/4 HW 1/4 E	1/4	3	5	1 15 s	R Z W	w	
2. Distance and direction from nearest town or city:  3. Owner of well: South EAST OF SALINE  R.R. or street: NEW K-12 SCHOOL									
Street address of well location if in city: 5 Miles Wast R.R. or street: NEW K-12 SCHOOL City, state, zip code: MENTUR, KANSAS 67465									
4. Locate with "X" i	in anation below.	6 Bara bala dia 15 in	Completion date	<b>.</b> 1					
A. Locate with A in section below:						Well depth 74 ft. 12-20-74			
						7 Cable tool Rotary			
NW	NE		_			8. Use: Domestic Z Pu	Bored Reverse rotal	7	
¥ w   -   -	E (1).00	5ite # 2				Irrigation Ai	ir conditioning Stock		
sw	SE						il field water Other	4	
	<u>                                   </u>	•				9. Casing: Material Threaded Welded		, ]	
5						RMP	Weightibs./f	i.]	
5. Type and color of material From 1					То	Dia in. to ft. dep		_	
5. Type and color of	material			From	10	10. Screen: Manufacturer's n	nome	Ī	
	Topsoil			0	/	Type S. S. #	Dick" Wies W	le	
	0-	2 (		,		Slot/gauze	Length 12 14	=	
	Clay · VCBA	2-Sanot		-	6	Set betweenft. o	ft, andf	t. t.	
SAM STONE RED				6	13	Gravel pack? La Size ra	nge of material	_	
İ	4	REO- HAR	20	13	47	11. Static water level:	mo./day/y face Date <u>/2-227</u>		
SAMPSTONE LICKS RED 4					30	12. Pumping level below land		7	
				60	1		hrs. pumping <u>60</u> g.p.m hrs. pumping g.p.m		
Clay-ORBY				59.	2	Estimated maximum yield	25 g.p.m	1	
	SAMD STONE	- REO-LIL	45	592	74	13. Water sample submitted:	mo./day/y	r.	
					/	Yes No  14. Well head completion:	Date	=	
						Pitless adapter	Inches above grade		
						15. Well grouted? With: Neat coment	Postorita X Consus		
						Depth: From ft. to .	20 ft.	1/	
						16. Nearest source of possible	e contamination:	1 19	
						Well disinfected upon comple		6 1	
					17. Pump:	Nat installed			
					Manufacturer's name Madel number	HP Volts	<u>-   </u>		
					Length of drop pipe	ft. capacityg.p.m	. (€) ™		
					Type: Submersible	Turbine			
	h					Jet	Reciprocating	ر ال	
(Use a second sheet if needed)  18. Elevation: 19. Remarks:						Centrifugal  20. Water well contractor's a	Other	4.14	
To Lievania.					This well was drilled under my jurisdiction and this report				
Topography:	·					is true to the best of my know	ledge and belief.	412	
Hill						Business name	License No	31.	
Stope						Address Walley N	Vilian R	7 - 2	
Valley						Signed Authorized rep	resentative 1-3-1	7/2/6	