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

WATER WELL RECORD KSA 82a-1201-1215

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Ţ	- 1	?	EW	sec	1/4	1/4	1/4	No.

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

1	County	Township name	Fraction	Section	Section number		Twn number	Range number		
Location of well:	Barton		nat rmf	<b>P</b> .			17	<b>3</b> 12		
Distance and directi	on from nearest town or cit			er of well			inger ng <b>to</b> n,Kansa	67544		
Street address of we	II location if in city:	Odin, Kansas	Add	ress:	110				in di	
Locate with "X" in s	ection below:	Sketch map:				4 We	II depth: 149 ft. D	ate of completion 5-20	-78	
N						4 Well depth: 149 ft. Date of completion 5-20 Well diameter 9 in.				
	<b>1</b>					5 🔁 Cable tool 🗌 Rotary 🔲 Driven 🗎 Dug  ☐ Hollow rod 🗍 Jetted 🔲 Bored 🗍 Reverse rotary				
						6 Use: Domestic Public supply Industry				
w						☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well <b>★ ☐ Stock</b>				
	11					7 Casing: Material PVC Height: above Actor				
	1 1 1 S					Threaded Welded Surface 22 ibs./ft				
	1 Mile					Diam. Weight 1bs./ft				
2	Тур	e and color of material		From	То	8 Scr	in. to ft. depth			
Surfa	ce			0	3		een: nufacturer			
					_		oe D			
Clay	yellow			3	18	i	t/gauze <b>drilled</b> le between 35 ft. and	L43 ft.		
Shale	blue			18	72		tings: avel pack 🚰 Yes 🗌 No S	ize range of material		
shell	hard sandy	(little	water 🕽	72	75	9 Sta	5 ft. below land surface	5_20_78		
Shale	mma u			75	103		ft. below land surface			
DITELL	gray	And Add the		73	103	_	ft. after hrs.	pumping g.p.m.		
	and hard			103			ft. after hrs mated maximum yield	pumping g.p.m.		
Snale	browngra	У		107	110	11 Water sample submitted:				
Shale	brown			110	120		Yes X No Date  II head completion:		1	
**	" li	ght		120	135	12 770	· -	] Inches above grade	•	
135 8	and rock	(water)		135	143			□ No	\	
100 80	THE TOCK	(#2001/		100	740	Dep	Neat cement  Bentonit	50 <sup>L</sup> ft.	7	
Shale	Brown			143	149	14 Ne	arest source of possible cor	tamination:	, ~	
						We	Direction Il disinfected upon comple	rion? Yes No	C	
						15 Pun		Not installed	\	
						Мо	nufacturer's name H del number H		5	
						Ler Typ	ngth of drop pipe ft be:	. capacity g.m.p.	,	
							Submersible	Turbine	4	
	(use	a second sheet if needed)				=	Jet [ Certrifugal [	Reciprocating Other	Tr	
16 Remarks: elevation							ter well contractor's certifi	cation:	6	
						1	s well was drilled under my ort is true to the best of my	'	13'	
Topography:							Jezek Water well drilling			
Slope to the north							iness Helyrood,	Kan. Lice 1891.	ζ.	
Upland							ned Luthorized represer	Date 6-9-	78	
☐ Valley						Ь	- V - // //			

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

Form WWC-5