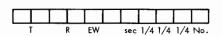
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD KSA 82a-1201-1215



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

								1	
	County /	Township name	Fraction	- 1-	Section	on number	_	Town number	Range number
1 Location of well:	MARLERA	Maryette	SN40-5	EY4		24		1175	R-5-N
Distance and diseas	ion from powerst town or ci	the second	7	3 Owner	of well	al		e Timme	
Distance and direct	ion from fledress fown of ci	" 12 E Max	mutte	0 0 11 11 11	O	~YES	ergi	Lumne	1
Distance and direction from nearest town or city: 12 E Marguette Street oddress of well location if in city: Address:							Marquette, Fans.		
Locate with "X" in	section below:	Sketch map:	4				4 We	II departi: 57 ft.	Date of completion 78
	N		Λ				We	ll diameter in.	
	1 1 1	1		- 1				Cable tool 🔼 Rotary	
	-	1		- 1					Bored Reverse rotary
		- 1		- 1		-	6 Use		lic supply Industry
w	E	,,,	Ø			-			conditioning Commercial
	. l 	n_{\parallel}	$\overline{}$	F				Test well	
	! Lxl	#	bal .					sing: Material	
L	S	j L		L				eaded 🗌 Welded 🔏	Weight lbs./ft
	→1 Mile ←					-	ي	im. Lin. to If ft. depth	Drive shoe? Yes No
2			>		F	То		in. toft. depth	
	Тур	pe and color of material			From	10	8 Scr	(2. / .	7.0
		Tools	:0		0	2		inufacturer Pul	Dia. 5"
			2				IV.	~	Length
	, Si	ilter ell	up		ä	22	<u> </u>	between ft. an	
	<i>(</i>).	1. 00		-	22	42	Fit	tings:	Yy - YyL" o Size range of material —
	Na	reported a	yo	- 4	7	1			o Size range of material —
	CANSO.	Lendto	Lance	Q 4	4	46	9 Sta	tic water level:	ce Date 4-18-25-
		1	0	4	U	50		mping level below land s	
	/3l	ue ska	le .	7	4	20			rs. pumping 25 g.p.m.
							_	ft. after h	rspumping g.p.m.
							Esti	mated maximum yield 🗲	30 g.p.m.
							_	ter sample submitted:	
									ote
						 		Il head completion:	Inches above grade
								Pitless adapter	
								II grouted? ÆYes Neat cement ☐ Bento	∐ No
						<u> </u>		oth: From ft. to	
								arest source of possible	0.
							ft.	Direction	Type Allow
							We	ell disinfected upon comp	
							15 Pur		Not installed
								inufacturer's name odel number	. HP Volts
							ı		ft. capacity g.m.p.
							Тур		_ ' ' '
							. =	Submersible	Turbine
	1	e a second sheet if needed)					ᅵᅢ	Jet Certrifugal	Reciprocating Other
14 Pamerles alou-	`							ter well contractor's cer	
16 Remarks: eleva	HOI							s well was drilled under	
									My knowledge and belief.
Topagraphy:							15	Esam Dears	
□ ніII								iness name	License Na.
Slope Upland								dress	Norte 5-12
Valley							319	Authorized repre	sentative

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

Farm WWC-5