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

WATER WELL RECORD KSA 82a-1201-1215

									П
	Ь	_	_		\Box	_	ب	_	\Box
1	Γ	- 1	R	EW	sec	1/4	1/4	1/4	No.

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

County 1 Location of well:	Township name	Fraction		Sectio	n number	**	Town number	Range number
Choward	Show Sarsam	NETNWE	NE + 3 Owner o	£ wall	2	Δ	17	00
Distance and direction from nearest town or ci		ne	Address		HS Ell	לידים ממל	orth Di	mass
Locate with "X" in section below:	Sketch map:						II depth: 98 ft II diameter 7 ir	t. Date of completio
						5 🔀	Cable tool Rotary	
W							☐ Test we ☐ ☐	r anditionin D Commercial
5						Thr	eaded Welded	Height: bove below Surface in. Weight Ibs./ft. th Drive shoe? Yes No
2 Tyr	oe and color of material			rom	То	<u>ප</u> ු	in. to 722 ft. dep in. to ft. dep	th Drive shoe? Yes No.
Surface)	se and color of material			2	2		reen: Inufacturer De Control	Dia. 55
Brown Clay				2	49		ot/gauze 16 ft. c	Length 20
Red Clay			1	19	65	Fit	tings: Collow	No Size range of material 4
Wellow clay			4	55	67	9 S t g	tic water level:	face Date 2-10-76
Janoly Real C	Cay)		4	7	70	10 Pur	mping level below land	
(Red Elay)	0			10	73	_		hrs. pumping g.p.m.
Sand Rock) + (Water))		13	98	11 Wa	iter sample submitted:	Date
10	30					1 —	ell head completion: Pitless adapter	☐ Inches above grade
Tested 45 d.	P. M. Q. C	55					Il grouted? X Yes Neat cement ☐ Ben pth: From	No tonite
			_			14 Ne		E contamination:
				,		15 Pur	mp:	Not installed
						Mo		HP Volts ft. capacity g.m.p.
		-				Ту	pe: Submersible	☐ Turbine
(us	se a second sheet if needed)] Jet Certrifugal	Reciprocating Other
16 Remarks: elevation	**						nter well contractor's c	ertification: er my jurisdiction and this
Topography:						e _F		of myknowledge and belief.
□ Hill						l	siness now Allica	License No.
Slope Upland Valley)	gne Busherer	0.3-11-10

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

Form WWC-5

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