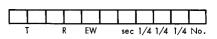
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

## WATER WELL RECORD KSA 82a-1201-1215



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

	County	Township name	Fraction		Section number			Town number	Range number	]	
1 Location of well:	Mc aherson		NUINE	5		2		30	4		
310-135 of meganina, 12						200	30 Drieling Co. o North Brin St chita, No				
Locate with "X" in section below: Sketch map:					<del></del>			4 Well depth: 450 ft. Date of completion 3-29-73 Well diameter 778 in.			
w								: Domestic Public	Bored Reverse rotary	1	
	-       		.,,				Thre Dia <del>S≠</del>	ing: Material Accept H eaded Welded PS m. Welded PS m. Welded PS	leight: above/below		
2 Type and color of material					From	То	in. to ft. depth   8 Screen:				
top soil					0	3	Manufacturer R. 4 B.  Type your Dia. 4				
Clary					3	72	Slo Set	between 110 ft. and	ength <u>#0'</u> 150 ft		
Sand + grand					42	90	Fitt Gro	rings: ovel pack 🗹 Yes 🗌 No	Size range of material <u>CD</u>	13	
clarg					90	112	9 Stat	ric water level: <u>C</u> ft. below land surface	Date 3-28-75		
Sand & Grand				1	113	150	10 Pum	pping level below land surf t. after hrs. ft. after hrs.	faces: pumping <u>100</u> g.p.m.		
							Esti	mated maximum yield 34		-	
								ter sample submitted: Yes ANO Date		1	
							1 —	I head completion: Pitless adapter	☑Inches above grade		
								l grouted?  Yes  Neat cement  Bentoni th: From  ft. to			
							14 Ned	arest source of possible con	ntamination:  Type Octu	44	
							15 Pum	ıp:	Not installed	1	
	,						Мо	nufacturer's name h del number h gth of drop pipe fi			
							Тур	e:	Turbine		
	(use	a second sheet if needed)					_ =	Jet [ Certrifugal	Reciprocating Other		
16 Remarks: elevation  pulled + plugged 4-15-75  Topography:    Hill   Slope   Upland   Valley						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** License No.** Address **Business name** License No.**  Address **Business name*** Date **15-16**  Authorized representative**  **Authorized representative***  **Authorized representative**  **Authorized representative**  **Authorized representative***  **Authorized representative**  **Authorized representative**  **Authorized representativ					