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

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

T	F	EW	sec	1/4	1/4	1/4	No.

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

1 Location of well:	Township name Emma	Fraction EY2 - A/E Y4  NW YA	Section	on number		Taas	Range number
Distance and direction from nearest own or cit	Y 144NWDA	lesta 30	wner of well	Or		Troyer	,
I Street address of well location if in city:	long old the	1 2	Address:	P.P.	I	Less	tow , hower
Locate with "X" in section below: N	Sketch map:					epth: <b>24</b> ft. C liameter <b>2"</b> in.	Date of completion 2-25
w E	Sterry	□ Telephon ×	Bly.	,	6 Use:	Domestic Public	Driven Dug Bored Reverse rotary supply Industry anditioning Commercial
S S					7 Casing Thread	Test well	
2 Typ	e and color of material		From	То	<u> </u>	n. to ft. depth	Prive shoe? Yes No
Top Sail			0	2	8 Screen Manuf	acturer <u>Erlian</u>	
Buff clays			a	11	Slot g Set be	auze <u>732</u> L tween <b>44</b> ft. and .	ength
	unlo - >	ooze	//	21		l pack XYes XNo	
Red of Blue	Shalw		21	25	9 Static	water level: _ft. below land surface	Date 2-25-75
					12	ft. afterhrs.	pumping g.p.m.
					Estimat 11 Water	sample submitted:	g.p.m.
							Aug Share
		ф.			13 Well g		No te .
		·			14 Neare	st source of possible co	ntamination:
					15 Pump: Manuf	acturer's name	Not installed
					Model Length Type:	number h of drop pipe f	t. capacity g.m.p.
(use	a second sheet if needed)				Je		Turbine Reciprocating Other
Topography:  Hill Slope Myland Valley		n to L, 12 2	for sele.	w	17 Water This we report Pel Busines Addres	well contractor's certif ell was drilled under my	ication: / jurisdiction and this / knowledge and belief.  NO 13 8 License No.

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

Form WWC-5