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

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

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ı	R	EW	se	c 1/4	1/4	1/4	No.

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

County		Township name	Fraction	Secti	Section number		Town number	Range number	
1 Location of well:	Pawnee		C/ SE <del>l</del>		18		23 22	19	
48-2	on from nearest town or cited W North 8.11 location if in city:	y: l <b>de road f</b> r	om Rozel	ner of weldress:		Roze	Josefiak		_
Locate with "X" in s	section below:	Sketch map:					II depth: 215 ft. D	ate of completion 11/1	4/74
 w						5 🗌	Cable tool Rotary Hollow rod Jetted : Domestic Public	Bored Reverse rotary	
	S Mile					Thr	ing: Material DVC Headed Welded X	eight: above/below urface 14 in.8507	е
2	· · · · · · · · · · · · · · · · · · ·	e and color of material		From	То		_ in. toft.depth!	rive shoe? Yes No	
12 Top 8	soil			0	3		nufacturer R&		
Cany				3	28	Slo Set	be <u><b>DVC</b></u> D t/gauze <u><b>Slot</b> 1/4</u> Le between 175 ft. and	ength <u>40'</u>	
Soft se	andy clay			28	49	Fitt	rings:	3/4 - 3/8 - 4/1 Size range of material	M3
Clay				49	54	9 Stat	tic water level:ft. below land surface	Date 11/14/74	
Rusty	rock			54	57	10 Pun	nping level below lond surf	oces: not test	pump
Fire c	lay			57	58	Esti	ft. after hrs mated moximum yield	OO g.p.m.	
Yellow	clay			58	62	11 Wa	tar cample submitted.	<u>11-</u> 18-74	
Fire c	lay			62	65	12 We	Il head completian:		
Shale				65	108			Anches above grade  No	
Good se	and rock			108	123	K	Neat cement Bentonit	<b>LO</b>	
Shale				123	125	14 Ne	arest source of possible con	tamination: UNKNO	n
Good se	and rock			125	210	We	Il disintected upon comple	rion? Yes No	
Hard				21	0 21	_	nufacturer's name	Not installed	
							del number H gth of drop pipe ft	P Volts . capacity g.m.p.	
						Тур	_	] Turbine	
	(use	a second sheet if needed)				_	Jet Certrifugal	Reciprocating Other	
16 Remarks: elevati	ion					l	er well contractor's certifi well was drilled under my		
Topography:						герс	ort is true to the best of my	knowledge and belief.	
Hill							ness name	License No.	
Slope  Upland						Add Sia	dress Great Bo med Fredia B	odson Date 11-2	20-7
□ Valley							Authorized represen	ntative	