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

WATER WELL RECORD KSA 82a-1201-1215

						_		
T	R	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: Harve u	Township name	Fraction NW 1 SE	1. SE 1		n number		Town number	Range number	
	<u> </u>				28		<u>245</u>	1 W	1
Distance and direction from nearest town  Street address of well location if in city:	IN of S	edgwick	Addre				Hershberge ick, Kansa		
Locate with "X" in section below:	Sketch map:					4 W	ell depth: <u>95</u> ft. E	Date of completion (19/2)	1/15
1 1 1						5	Cable tool Rotary	Driven Dug Bored Reverse rotary	1
w!!	E .	Ø					e: Domestic Public		
iii						TF	sing: Material <b>Cem-Act</b> readed Welded	ourface 34 in.	
S 1 Mile→						. 7	6 in. to 25ft, depth	Weight lbs./ft Drive shoe? [[] Yes [[] No	
2	Type and color of material			From	То	0 5	in. toft. depth!	1 - 1 - 1 - 1 - C	1
Topsoil	5 b a .			0	1	M Ty	onufacturer	nson Well Co	Tuis
B C	Sand -	Coarse		15	45	\$1 Se	ot/gauzeL t between ft. and	ength <u>30</u> 95 ft	
Red Clau		W. C.		45	52	Fi G	ttings: ravel pack 🙀 Yes 🗌 No	Size range of material 3/8	<u> </u>
Gravel-me	edium fin	e		52	95	9 St	atic water level: ft. below land surfac	e Date	
							imping level below land sur	faces:	]
						_		. pumping g.p.m.	
							ater sample submitted: ] Yes <b>X</b> No Dat	e	
						_	ell head completion:	<b>3</b> Inches above grade	1
						13 W	ell grouted? XYes	□No	1
						Ď	Neat cement Benton		1 2/2
						ft		outh Type Dom	
						15 Pc		Not installed	1
				_		<u>۸</u>	odel number 61 5446	erless Volts —	_
						•	/pe:	ft. capacity <i>900</i> g.m.p.	3
							Submersible Jet	X Turbine ☐ Reciprocating	
16 Remarks: elevation	(use a second sheet if need	led)			L	17 \	Certrifugal ater well contractor's certi	Other	$\overset{\sim}{\kappa}$
TO REMAINS: GIEVANION						TI	ater well contractor's certi is well was drilled under m port is true to the best of m	y jurisdiction and this	8
Topography:							Weninger Or	illing 238	No.
Slope						A	ddress Maize, Ke	License No.	250
Upland Valley						S	Authorized representation	end tive	ري ( ا
Forward the white, blue and pink copies to	the Kansas State Dept. Of	Health.						Form WWC-	.5