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

WATER WELL RECORD KSA 82a-1201-1215

								\Box
ш			L					
		?	EW	sec	1/4	1/4	1/4	No.

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

1 Leasting of walls	County	Township name	Fraction		Section number			Town number	Range number	
1 Location of well:	Stafford	<u> </u>		`		23		R15W		
Distance and direction from nearest town or city: 1 mi. East of Macksville, Kansas Street address of well location if in city: Address						: Dor	n Suitor			
							. John, Kansas			
Locate with "X" in section below: N						4 Well depth: 100 ft. Date of completion Well diameter 24 in.				-75
W							5 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary 6 Use: Domestic Public supply Industry Irrigation Air conditioning Commercial Test well 7 Casing: Materia Catal Height: above below Threaded Welded Surface 12 in. Diam. Weight 30.3 lbs./ft.			
2	1 Mile				From	То	16 —	_ in. to 60 ft. depth 0	rive shoe? Yes X No	
	Тур	e and color of material			From	10	8 Scre	een: nufacturer <u>Doerr</u>		
Sandy top	soil		30 ame		0	3	Тур	• Double-slot	ia. 16"	
Sandy clay	7 & gray clay				. 3	15	Set between 60 ft. and 100 ft.			
	7 & fine sand				15	40		ings: vel pack 🔀 Yes 🗌 No S	3/8.	-200
Fine sand	& sandy clay	streak			40	55		ic water level: 6_ft. below land surface	Date <u>4-22</u> -75	
Fine sand					55	65		nping level below land surfa ft. after hrs.		
Sand & gravel						95	_	ft. after hrs.	pumping g.p.m.	
Hard limes	stone streaks	& gravel 98 - 9	9		95	100		ter sample submitted:		
							1	Il head completion: Pitless adapter 12	Inches above grade	
									□ No	
	and the second s						Dep	th: From ft. to _	<u> 10. ft.</u>	
								NONE KNOWN prest source of possible con possible con possible con	tamination:	
								II disinfected upon complet	rion? Yes X No	
							15 Pum Mai	nufacturer's name	Not installed	
								del number H gth of drop pipe ft		
							Тур	e:		
						-		Submersible	Turbine Reciprocating	
		a second sheet if needed)						Certrifugal	Other	
16 Remarks: elevation							This	er well contractor's certifi well was drilled under my	jurisdiction and this	
Topography:							Clar	ort is true to the best of my	Inc. 185	
☐ Hill							Add	ness name dress Great Bend	KS License No.	,_
Upland Valley							Sig	Authorized represer	Date 4-22-	75