## WATER WELL RECORD KSA 820-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

County Educated Fraction		Section number	Township number	Range number
. Location of well:	4NE114	5	1 24 s	r 18 E/W
Distance and direction from nearest town or city:	l l	ner of well:	Jerome Fox	
treet address of well location if in city:	ł	street:	RFD 1	05 6751.7
Charles of 1.1	City, s	tate, zip code:	Kinsley, Kans	
I. Locate with "X" in section below: Sketch map:  N			Well depth 3/ ft.	9-19-77
			7 Coble tool X_ Rotary	
w i i i i i woll # 1				Bored Reverse rotary
w i was			8. Use: Domestic P	
W				ir conditioning Stock il field water Other
SW SE			9. Casing: Material Ste	
			Threaded Welded	iSurface18in.
S				WeightIbs./ft.
1 ← 1 Mile → 1		From To	Dia in. to ft. dep Dia in. to ft. dep	
. Type and color of material		From 10	Screen: Manufocturer's	
Nan nail		0/	Doer	
			Type steel Slot/arex 3/16	Dia
Clay		1 3	Set between	ft. and <u>31</u> ft.
land		5/10	ft	
H. O				mo./day/yr.
Shavel		10 31	ft. below land su	
Clay		31 45	12. Pumping level below land	d surfaces: hrs. pumping 350g.p.m.
				hrs. pumpingg.p.m.
			Estimated maximum yield —	g.p.m.
			13. Water sample submitted:	mo./day/yr.
				Date <u>3-2,5-77</u>
			14. Well head completion: Pitless adapter	Inches above grade
			15. Well grouted? X	
			With: X Neat cement	Bentonite Concrete
			Depth: From Oft. to	
			16. Neorest source of possible ft Direction	
			Well disinfected upon comple	etion? HTH YesNo
			17. Pump:	X Not installed
			Manufacturer's name  Model number	HP Volts
			Length of drop pipe	ft. capacityg.p.m.
			Type:	T L
		<del>  </del>	Submersible Jet	Turbine Reciprocating
(Use a second sheet if needed)			Centrifugal	Other %
8. Elevation: 19. Remarks:			20. Water well contractor's	
			This well was drilled under m is true to the best of my know	· · · · · · · · · · · · · · · · · · ·
Topography:			Rosencrantz-Be	
Hill			Business name Address Great Bend	Kansas 67530
Slope Upland			I dondek	1000 . 12-1-17
Valley			Signed Authorized rep	presentative Date
ward the white, blue and pink copies to the Department of Health and Environ	ment		0	Form WWC-5