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

## WATER WELL RECORD KSA 820-1201-1215

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

Location of well:	county Edwards	Fraction 1 1/52/12 5/2 1/4 1/4	Section	number	Township number Range number
Street address of well location if in city:  3. Owner of well:  R.R. or street:  City, state, zip code.					Trousable, Ks.
Locate with "X" i		Sketch map:			6. Bore hole dia. 29 in. Completion date 30-24 Well depth 9 ft.  7 Cable tool _ Rotary _ Driven _ Dug _ Hollow rod _ Jetted _ Bored _ Reverse rotary  8. Use: _ Domestic _ Public supply _ Industry _ Irrigation _ Air conditioning _ Stock _ Lawn _ Oil field water _ Other
S  1 Mile ————————————————————————————————————				9. Casing: Material Stee Height: Above or betow Threaded Welded Surface 18 in. RMP PVC Weight Ibs./ft. Dia. Lin. to 1 ft. depth Wall Thickness: inches or Diain. to ft. depth goge No	
Top So	il Sandy Olau		2	2	Type Steel Dia. 16
SANDE Gray (	Gravel loss	<u>ن</u>	41/2	15 21	Set between
Fine S SAnd &	and & Clay Gravel Clear	Coarse, lo	21 Ose 23	23 56	12. Pumping level belaw land surfaces:
Sand &	Clay Gravel Clear	-Coarse lo	56 cse 65½	65% 91	13. Water sample submitted: mo./day/yr.  Yes No Date 7-30-74  14. Well head completion: Pitless adapter Inches above grade
Drown			97	92	15. Well grouted?  With: Neat cement Bentonite Concrete  Depth: From ft. to ft.  16. Negrest source of possible contamination:
					ft. Line Direction Lyne September 1998 No No 17. Pump:  Manufacturer's name
					Model number
	(Use a second sh	neet if needed)			Jet Reciprocating Other
18. Elevation:  Z 0 5 8  Topography:  Hill Slope Upland Valley	19. Remarks:				20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  **Noncompte.** Bemis 194  Business name Address Scat Band, KS.  Signed **Noncompte.** Date 9/29  Authorized representative
Forward the white, blu	e and pink copies to the Department o	of Health and Environment			Form WWC-5