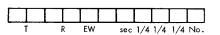
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD KSA 82a-1201-1215



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

1 Location of well:	County	Township name	Fraction	1, ,	Section	on number		Town number	Rang	ge number	
	Trall	Hayrewille	CNE		er of well: Wa			7275	<u> </u>	RIW	
	on from nearest town or o	ity:				Bod	yne.	w. wille	ims		
Street address of we	II location if in city:			Addı	ess:		Ex	ston Kus	_	6756	9
Locate with "X" in s	ection below: N	Sketch map:						l depth: 140 i		completion 3	Z18/
	!!!							Cable tool Rotary		en Dug	
	<b>-*</b>							Hollow rod Jetted		Reverse	rotary
w	E						6 Use	: Domestic P			′ .
	1 1							Test well	4		
	1 1 1							ing: Materia		above/below	
- I	S Mile						Djo		Weight	7 2481/F	
2	· · · · · · · · · · · · · · · · · · ·				E	То	_	in to ft. dep		noe ?   Yes	□1/40
	1)	pe and color of material			From	,,	8 Scre	een: nufacturer <b>W4.5</b>	)	JEnt.	
Zije	Soil				0	//'	Тур	SI Free the	≥_ Dia	16,	
Fine	(dry) Sa	nd			11'	19'		t/gauze <b></b> ft.	Length . and	ft	
Sand	- Clay	String			19'	321		ings: vel pack <b>X</b> Yes 🔲	No Size ra	nge of materia	110
R	u cli	The state of the s			201	41	9 Stat	ic water level:		2/10/	70 
A	o cray	-1 6			<u>ا ا ر ار،</u>	70		tr. below land suppling level below land		2/18/7	د/
Enersi	V Sand	dark	<del>)</del>		46	3/	8	7 ft. after 2	.hrs. pump	ing/ <i>loc</i> g.	
Medin	m Fine.	Sand (14	w		١٦٠	63	5.2 Esti	ft. after <b> 5</b> mated maximum yield		ing <i>ff<b>oo</b></i> g. g.p.m.	.p.m.
White	Clay	-			63	65	11 Wat	er sample submitted;	٥.	en 19:	15
Med 3	ine Das	red Caken	Clean	,)	861	1401	12 Wel	Yes No	Date		, ,
7/1	y Hend	Class	_		14	01		Pitless adapter		es above grade	e
<i>A</i> ·		(110)	2/ A.		17			l grouted? Yes Neat cement Ber	No ☐ ntonite	) 	
01	ng has	4 week f	Mall				Dep	th: From 🔼 ft.	to 17 f		7
Helded	to bot	rom				<u> </u>	ft.	prest source of possible  Direction		<u>-1722 - 2</u>	iele
	TOR	ed Och		· ·	$\angle$		We	disinfected upon co			□No
1	dan	al usis!		K			l	nufacturer's name	~ <del>+</del> -√	installed ACM	4
Warne	W. Till	lianes		4				del number gth of drop pipe <b>£2</b>	HP <b>△</b> ft. cap	acity <b>250</b> g.	.m.p.
1	0+ 9E	0.1m 1	1:	Fan.	./~		Тур	-	<b>⊠</b> Turb	·	·
11		11 Ph	non)		17	75-		Jet Ada S	Rec	iprocating	
16 Remarks: elevati		se a second shift when	<u> </u>	<u>۔</u>				Certrifugal er well contractor's c	Oth		
: Remarks; elevan	Tin	- Cycll	21				This	well was drilled unde	er my jurisd	iction and this	1
Topography:	- Klin	prec - E	eter	20-			repo	ells on	of my mow	ledge and beli	ef. /2
Hill	911	7/-	lin a	n)	Kn	اله	Busi	ness name 103g) がい	10	License	e No.
Slope (	1000	Kluice		-	1 -	-	Sign		presentative	Date	118
Valley		Kansas State Dept. Of Hea					L	Authorized rep	wha	an Ki	