*		WATER WEL	L RECORD F	orm WWC-				
LOCATION OF W	ATER WELL:	Fraction		Se	ction Number	Township Numl	ber	Range Number
County: Kiowa			SE 1/4 SE	1/4	7	т 27	S	R 18 XE(W)
	on from nearest town or			-				•
	les north and			burg, K	S			· · · · · · · · · · · · · · · · · · ·
WATER WELL O		_	er Stotts					
RR#, St. Address, B			E. Grant					ision of Water Resources
City, State, ZIP Code			ensburg, K			Application No	umber: no	t Required
LOCATE WELL'S AN "X" IN SECTION								
TYPE OF BLANK  1 Steel 2 PVC  Blank casing diameter Casing height above TYPE OF SCREEN ( 1 Steel 2 Brass  SCREEN OR PERFO	CASING USED:  3 RMP (SR)  4 ABS  1 Ind surface 24  OR PERFORATION MA  3 Stainless stee 4 Galvanized si  ORATION OPENINGS A	Pump test of Yield .unknowers the Yield .unknown .un	R LEVEL	was not was	pelow land surf. Ck d. ft. af. ft. af. ft. af. ft., afer supply later supply garden only department? Yew Water tile (specify below below lbs./ft/CC	ace measured on moter	olday/yr lours pump lo	o/day/yr sample was sub- No X Clamped
1 Continuous s	lot 3 Mill slo	ot	6 Wire w			9 Drilled holes		,
2 Louvered shu			7 Torch o	• •				
Annular GROUT MATERIA	Fill F AL: 1 Neat ceme	From	ft. to ft. to ft. to ft. to ft. to ft. to	9.9 70 3 Bent	ft., Fronft., Fron ft., Fron	า	ft. to.	
irout Intervals: Fro	omπ. τα source of possible conta		., From	π.	to			ft. to
	4 Lateral lin		7 Dit priva					ndoned water well
<del> </del>			7 Pit privy			I storage 15 ( ilizer storage 16 (		
2 Sewer lines	5 Cess pool		8 Sewage lagoo	ΣΠ		•		er (specify below)
	wer lines 6 Seepage	Pit	9 Feedyard					
FROM TO	Northwest	THOLOGIC LOG		T CDOM	How man	<del></del>	1101 0010	100
FROM TO 14	Fine sand to			FROM	то	LII	HOLOGIC	LOG
					<del> </del>			
14 20	Sand & grave	I, medium Co	o iine co		<del>       </del>			
20 2/	coarse							
20 34	Sandy tan cl			ļ	<del>                                     </del>			
34 39	Sand & grave		to fine	<b>+</b>	-			
39 54	Clay, sandy,			ļ	<b> </b>			
54 99	Sand & grave			<u> </u>	ļ			
	coarse w/st	reak of clay	· @ 79'		<b> </b>			
				ļ				
	<u> </u>							
	<b></b>			<b> </b>				
				<b>_</b>				
								my jurisdiction and was
completed on (mo/day	y/year) 12./.2	2/87			and this recor	d is true to the best o	f my knowl	edge and belief. Kansas
Vater Well Contracto	r's License No	185	This Water We	Il Record wa	as completed o	n (mo/dety/yr) $\dots 1.2$	2,/23./.87	<i>J</i>
nder the business na	ame of Clarke W	ell & Equipm	ent, Inc.		by (signati	re) / /	1/1/2.	L
	typewriter or ball point pen.							
Department of Health a records.	and Environment, Bureau o	water Protection, rop	ena, nansas 66620	/3∠∪, relepno	ne. 913-862-9360	o. Seno one to WATER V	VELL OWNE	n and retain one for your