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

410

WATER WELL RECORD KSA 82a-1201-1215

		П				
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т	D	E\A/	 1/4	1 /4	1/4	No.

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

	County	Township name	Fraction		Section	n number		Town number	Range number	1
1 Location of well:	1 .'		NENW.	CE		6		28	35	
Distance and directi	ion from nearest town or cit	ty: 12 miles	NE	3 Owner	of well:	Md	1 we	Carroll - to	relma Clark	1
Street address of we	II location if in city: 0	+ Vlysses	Kanson	Addre	ess: A	lbug	urqua	v.W. Ger	den City Kass	
Locate with "X" in	section below:	Sketch map:						l depth: <u>483</u> ft. I diameter <u>16</u> in.	Date of completion 3/16/	76
	1 1 1						_	= '	Driven Dug Bored Reverse rotary	,]
w							6 Use:		lic supply Industry	.]
 -							7 Casi	ng: Materia		-
	s .						Thre	eaded Welded 🚣	Surfacein.	
2	→1 Mile →	be and color of material			From	То		in. to 485tt. depth in. toft. depth	Drive shoe? Yes No	<u> </u>
1.	1	e dia color of malerial					8 Scre	nufacturer Staff	ed	
Tup300	1				0	4	Тур	e	Dia	
Brown	Clay				4	23	Set		d.300 ft.450	,
Sond					23	65		ings: vel pack Yes N	o Size range of material	,
Brown	Clay		ali e		45	107		ic water level: tt. below land surfa	ace Date 3/10/16	
Soud					107	263	10 Pun	ping level below land s	urfaces: rs. pumping 583 g.p.m.	
Brown	Clay				263	303			rs. pumping g.p.m.	
Sond t	Gravel				303	440	11 Wa	ter sample submitted:		1
Brown	Clay				440	462	12 We	I head completion:	_	1
Soul					462	480	\ /	Pitless adapter	Inches above grade	$\mathcal{U} \mid$
							/ \ □	Neat cement Bento	onite	. 9
							14 Ne	arest source of possible	contamination:	Top I
				19		ł		Il disinfected upon com		₄ (0
	-						15 Pun Ma		Not installed	5
								del number gth of drop pipe 400	_ HP Volts _ ftcapacity/g.m.p	ε
	, , , , , , , , , , , , , , , , , , , ,						Тур		Turbine	
	Cus	e a second sheet if needed)				1. □	Jet Certrifugal	Reciprocating Other	16
16 Remarks: elevá		e d second state it negaca			l	L		ter well contractor's cer		┤
	in the second						ı		my jurisdiction and this my knowledge and belief.	1 7
Topography:		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					نسا	WEARENGEN	Drillege JH2	
☐ Hill ☐ Slope							i	iness nam	-Garden Coty Ka	خ رو
Upland Valley		7						ned Buller Authorized representation	esentative Date 3/13	196 8
16	blue and pink copies to the	Kansas State Dept. Of He	alth.					•	Form WWC	

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.