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

WATER WELL RECORD KSA 82a-1201-1215

T	R	EW	sec 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	on number		Town number	Range number	7
1 Location of well:	Richland	NEWNEWN	l.	/3	5	1225	RIW	
Distance and direction from narest town or ci	W King M	lan 3 Owi	ner of well	. 0	Pris	Expe	N.	
Street address of well location if in city:	-) i correspond	Ad	dress:	Ras	10 - 1	Kans.		
Locate with "X" in section below:	Sketch map:		•		4 Wel	l depth: <b>210</b> ft I diameter <b>914</b> in	Date of completions	27-75
N						Cable tool Rotary	Driven Dug	-
					_	Hollow rod Jetted	Bored Reverse rota	ry
W E					6 Use:		olic supply Industry	al
						Test well	conditioning commerci	
							Height: above below	
5					Dia	m.	Weight 200 lbs./ft	-
2 Mile			T	Ι		_ in. to ### ft. dept _ in. to ft. deptl	h Drive shoe? Yes	46
Тур	e and color of material	····	From	То	8 Scre		fr. 10.	7
top - clay			0'	24		nufacturer 144 -	Dia. 5"	_
Soudy Class			24	3/	1 '	t/gauze	Length	-
0	Jan B)		21	1/4)	Fitt	ings:	No Size range of materials	13/0
1) of	au laci		31	77		ic water level:	No Size range of material 4	7
13m Clay			49	5/		ft. below land surf	ace Date My 2	7-75
5/ - 1/6	urse San		51	110	1	ping level below land: ft. after h	A / 1	1.
Well Botton	relion W	hite Cla	1			ft. after h	nrs. pumpingg.p.m	1.
			7			er sample submitted:	g.p.m.	
							ate	_
		-	1		1 —	I head completion: Pitless adapter	Inches above grade	
						l grouted? ☑ Yes Neat ceme <u>nt</u> ☐ Benta	□ No	İ
						th: From 3 ft. to		
						rest source of possible Direction		Ti tout
					1	Il disinfected upon com		40
					15 Pum Mar	ip: nufacturer's name	Not installed	_
					Mod	del numb <b>205P40</b>	HP	20
					<u>Ту</u> р		ft. capacity 20g.m.s	"
			<del>                                     </del>	ļ	4	Submersible Jet	Turbine Reciprocating	
(use	e a second sheet if needed)		<u> </u>		. =	Certrifugal	Other	_
16 Remarks: elevation					1	er well contractor's ce well was drilled under	rtification: my jurisdiction and this	
Topography					1		y knowledge and belief.	
Topography:				ż		ness name	Aicense No	o.
Slope Upland					Adg Sigi	M. Nill	Date LUL	146-75
Valley					3.9	Authorized repr	esentative	
Forward the white, blue and pink copies to the	Kansas State Dept. Of Hea	lth.			•	July hours	Form WWO	C <b>-</b> 5