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

WATER WELL RECORD KSA 82a-1201-1215

						_	_		ı
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	n number		Town number	Range number
1 Location of well:	Kingman		5E/SE/	SE		23		29	9
Distance and direct 4 Morth Street address of we	ion from nearest town or city. I East & 30. Il location if in city:	rida, Ko		3 Owner		: D: 120	of h	Bank &	illfrig
Locate with "X" in	section below:	Sketch map:					4 W		t. Date of completion 10/19/7.
							5 [Cable tool 🕢 Rotary	Driven Dug Bored Reverse rotary
w	E							Test well	r conditioning Commercial
	S .	•					TH	nreaded Welded [Height: above below Surface II in. Weight I lbs./ft. th Drive shoe? Yes No
2	—→1 Mile ————————————————————————————————————	e and color of material			From	То		in. to ft. dept	
Jon	Soil		,	,	0	3	М	creen: anufacturer	1 B
Sand	y Brown	r clay			3	7	SI	ot/gauze ///6	_ Length3
Sand	+ gravel	w/clay	streaks	>	7	55	Fi G	ttings: ravel pack 🔏 Yes 🔲 I	No Size range of material em-3
Red	bed				55	70	9 St	atic water level: 15 ft. below land sur	face Date 18/14/76
·							_		hrs. pumping <u>60</u> g.p.m.
							l	ft. after timated maximum yield	hrs. pumping g.p.m.
							_	ater sample submitted:]Yes 🏻 📉 No [Date
							\ <u></u>	ell head completion: Pitless adapter	☑ Inches above grade
			· · · · · · · · · · · · · · · · · · ·			,	$/\backslash$	ell grouted? 【Yes Neat cement 【 Bent epth: From ft. to	
-								earest source of possible . <u>A O O</u> Direction S fell disinfected upon con	contamination: South feet Type District npletion? Yes No
							15 Pı	•	Not installed
·							1 ~	odel number	HP Volts ft. capacity g.m.p.
								/pe:] Submersible	☐ Turbine
	(use	a second sheet if needed	1)				. =] Jet] Certrifugal	Reciprocating Other
16 Remarks: elevat	ion						TH		r my jurisdiction and this
Topography:							7	Reservant	of my knowledge and belief.
Hill Slope Upland Valley							A	ddress Authorized repr	Bend, Falicense No. Date 10/20/15 resentative