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

WATER WELL RECORD KSA 82a-1201-1215

T	2	EW	sec	1/4	1/4	1/4	Nα.	•
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Kansas State Dept. Of Health (Water Well Contractors) Forbes–Bldg. 740 Topeka, Kansas 66620

1 Location of well: County Township name Fraction NW 5		,	n number		Town number 3 0	Range number		
Distance and direction from nearest town or city:	3 Owner	of well	WA	yN	2 Re110.	e		
Street address of well location if in city:	Addre	PSS: X) l i	v s	Uhst Pr	AH Ka		
Locate with "X" in section below: Sketch map:					Well depth: 187 ft. Date of completion 4-7- Well diameter in.			
					Cable tool X Rotary	Driven Dug		
					-	Bored Reverse rotary		
w postur	٤			6 Use:	Domestic Public Irrigation Air co	supply Industry		
!!				7 Casi	ng: Material PPC H	eight: <u>above/below</u>		
1 1 1				Thre	eaded Welded K	urface 30 in.		
S 1 Mile				Dia 4	m. _ in. to / 2.6 ft. depth!D	/eight lbs./ft rive shoe? [] Yes [No		
2 Type and color of material		From	То					
5011		Ø	3	8 Scre Mai	ren: PECRI Portuger D	<u>ess</u>		
SAND		5	13	Slot	/gauzeLe	ength		
_				Fitt	between 96 ft. and a	LAN		
CIAY		/3	21	Gra	vel pack Yes 🗌 No S	size range of material		
SAND		21	56	9 35	ic water level: ft. below land surface	Date 4-2-76		
whitecia	y (56	58	10 Pum	ping level below land surf			
SAND		58	79		ft. after hrs. ft. after hrs. nated maximum yield			
Clav		79	82		er sample submitted:	g.p.m.		
Men Coap	SAND	8 入	96	12 Wel	(es XNo Date I head completion:			
FINE SAND		- 1	102		_	Inches above grade		
C/AV			124	(X)	grouted? Yes Neat cement Bentonit th: From ft. to	, No.		
5 ha/e		26	127		rest source of possible con			
J "47C		~0	,,,	ft.	Direction	Type I		
				15 Pum	l disinfected upon complet	tion? Yes No		
				Mar	iufacturer's name			
					del number H gth of drop pipe ft	P Volts (
AND				Тур	•:	_ ` ` `		
						Turbine TReciprocating		
(use a second sheet if needed)	,,				Certrifugal	Other		
16 Remarks: elevation					er well contractor's certifi well was drilled under my			
WINDMILL					rt is true to the best of my	knowledge and belief.		
Topography:				L	YMAN BE	140		
☐ Slope				Add	ress name	License No.		
Upland		,		Sign	ed Authorized epreser	Date 7-7-7		
☐ Valley				<u> </u>	Authorized represen	/		