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

NW NW SE

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

County	County Fraction			Section number		Township number	Range number		
1. Location of well: Mea		SE 1/4 NW1/4 H	1/4	1	3	1 31. s	R 26	E/W	
2. Distance and direction from nearest town or city: S. E A Forder 3. Owner of well: Ray mund R. Orr R.R. or street: R.R.									
Street address of well location if in city: City, st					tate, zip code: Fowler, Ks. 67844				
4. Locate with "X" in section below:		Sketch map:	\			6. Bore hole dia. # #in. Well depth 140 ft.	Completion date	25/17	
NW NE	K	DAM) K				7 Cable tool X Rotary Hollow rod Jetted	Driven Dug Bored Reverse		
						8. Use: Domestic Public supply Industry Irrigation Air conditioning X Stock Lawn Oil field water Other 9. Casing: Material			
						Threaded Welded Surface in. RMP PVC Weight lbs./ft. Dia in. to ft. depth Wall Thickness: inches or Dia in. to ft. depth gage No 20			
5. Type and color of material				From	То	10. Screen: Manufacturer's n			
Top Soil				0	10	Type Styren	3:40.00		
Sand Rock				10	40	Slot/gauze	_ Length	ft.	
Gravel				40	50	Gravel pack? Size rar	nd	1/4	
Sand Rock				50	80	11. Static water level:		day/yr.	
Clay				80	120	12. Pumping level below land	surfaces:		
Grave				120	130	ft. after h		g.p.m.	
Shale				130	140	Estimated maximum yield 13. Water sample submitted:		g.p.m. day/yr.	
						Yes No 1	Date		
						Pitless adapter	Inches above gr	ade	
						With: Neat cement Depth: From ft. to .	Bentonite X Co	ncrete J 6	
				-		16. Nearest source of possible ft Direction	Туре	'	
						Well disinfected upon comple 17. Pump:	tion? Yes Not installed	<u> </u>	
						Manufacturer's name Aco		16	
							ft. capacity ——g	,.p.m. (₹) m	
						Submersible	Turbine	. 1	
(Use a second sheet if needed)						Jet Centrifugal	Reciproco	8.	
18. Elevation: 19. Remarks:					:	20. Water well contractor's c This well was drilled under my		eport W	
Topography:						is true to the best of my know	edge and belief.	a 5	
Hill X Slope						Business name Address Measle		se No.	
Upland Valley						Signed Sets	astal Date 3	-25-77 8	
Forward the white, blue and pink copies	to the Department	of Health and Environment					Form WWC	-5 &	