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

WATER WELL RECORD KSA 82a-1201-1215

			-					П
	1							
T	R	EW		sec	1/4	1/4	1/4	No.
-					٠, ٠	,, ,	٠, ,	

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

1 (seekies of well	County	Township name	Fraction		Section number			Town number	Range number		
1 Location of well:	Seward		NE,NE,	NW	27			315	31W		
5 Miles west & 4 miles North of Plains				3 Owner Addre	er of well:		O.M. Fricke Montezuma Kansas				
Locate with "X" in section below: Sketch map:					4 Well depth: 410 ft. Date of complet Well diameter 28 in.			ate of completion $3/25$			
	X						5 🔲	Cable tool Rotary Hollow rod Jetted	Bored Reverse rotary		
w	- E							Domestic Public Trigation Air co Test well Test well The Material Stl.	nditioning Commercial		
	S						Thre	eaded Welded XX			
2	Туре	e and color of material			From	То		_ in. to ft. depth	The since is the signed		
Well dril	led near TH	l-75 which i	s locat	ed			Mai	nufacturer <u>Brown &</u>	ia. 16"		
at the NE	Corner of t	he NW4, Sec.	27, T3	ls,			Set	t/gauze 1/8" Le between 197 ft. and _	410+		
R31W, Sew	ard County,	Kansas						ings: vel pack K Yes No S			
				-+			_1	ic water level: 73t. below land surface ping level below land surf			
								93ft. after 15 hrs. Olft. after 1 hrs. mated maximum yield 3	pumping 1865g.p.m.		
		-					11 Wat	rer sample submitted: Yes XXNo Date			
	•						1 —	l head completion: Pitless adapter	Inches above grade		
								I grouted? Yes X Neat cement XXBentonit th: From ft. to _	2 N₀ • □ 10 _{ff} .		
							14 Nec	arest source of possible con Direction Il disinfected upon complet	tamination: Unk		
						<u> </u>	Wel	_	ion? X Yes No		
							Мос	del number H	I		
							Тур	_	Turbine		
	(use	a second sheet if needed)						=	Reciprocating Other		
16 Remarks: elevati	ion						l	er well contractor's certifi well was drilled under my			
Topography:							Ī	ort is true to the best of my ayne—Westerr	Co.		
Hill Slope Lauther Slope Valley							Add	ress name Garden Ci ned Authorized represen	unt Date		

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

Form WWC-5

TEST HOLE REPORT



Layne-Western Company, Inc.

-WATER SUPPLY SERVICES SINCE 1924-

P.O. Box 686 - W. Hwy. 50 Garden City, Kansas 67846

Contract	Name	O.M. Fricke	TES	TEST HOLE				
Job No.	ĸ	-433	Date_	2-4-75	No1	-7 5		
CityM	ontezum	na	State_	Kansas	DrillerGill			
N.E.	Corner	Hole		Hole	n of Test Vater Level185			
		4 Sec. 27 of T 31S , Seward Co., Kansas .		Measure	dHo	urs After	Complet	ion
From	То		Descripti	on of Strata		1	Water Bear	ing
0 2 23 56	2 23 56 60	Topsoil Green clay Tan clay Fine to coarse sand and c	aliche					
60 97 1 03	97 103 180	Tan and red clay Sandy clay Fine to coarse sand mediu						
180 278 282	278 282 318	Fine to coarse sand medium Tan and green clay Fine to coarse sand medium						
318 360 378	360 378 381	Blue clay Fine to coarse sand medium Blue clay		el				
381 410	410	Fine to coarse sand medium Tan and white clay with 1						
Remarks:								-