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

С

WATER WELL RECORD KSA 82a-1201-1215

_		ENA	·	1/4	1/4	1/4	\Box
	K	EVV	sec	1/4	1/4	1/4	1/0.

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

Lippoldt 1-B		CWW Inv.	#11212					
County	225	Township name	Fraction	Section	on number		Town number	Range number
Location of well: Heads	באק		C SWZ		28		318	31 W
stance and direction from neare	st town or ci	tv: O · N	h & 1 mi. 3 0	wner of well	Sage	Dr	illing	
1		79 ml. North	h & I mil•					
Street address of well location if	in city: 🖺 🗷	St of Krames	Kansas A	Address:	Box Libe		. Kansas 67901	
ocate with "X" in section below		Sketch map:			<u></u>		ell depth: 300 ft. [Date of completion $\frac{4/1}{2}$
N				IE	1511	W	ell diameter9_ in.	
!!!	<u> </u>			12	210		Cable tool Rotary	
	i		اتج				Hollow rod Detted	
			10	twy 1	60	6 U	se: Domestic Publi	supply XX Industry
w ;	! 6		l	1			☐ Irrigation ☐ Air co	onditioning Commercial
×	·i		· <u>-</u> -			7.0	asing: Material PVC	
			2				hreaded Welded	
s			S			D	iam.	Weight lbs./ft
1 Mile-					Kis	net	5½ in. to 230t. depth	Orive shoe? Yes No
2	Тур	oe and color of material		From	То		5½ in. to 300t. depth	
				_			Mesco	
Surface				0	2	т	ype PVC	Dia. 5½11
Sandy Clay				2	37	S	lot/gauze = 030 et between 240 ft. and	ength 10 ·
							et between ft. and ittings:	
Fine Sand				37	56		ravel pack 🛚 Yes 🗌 No	Size range of material —
Coargo Sand				5.6	61.	9 S	atic water level:	/ /11 / 175
Coarse Sand				56	64	<u>T</u>	87 ft. below land surfac	Date 4/11/73
Clay & Gravel	60/	40		64	88		umping level below land sur	
Coarse Sand				88	240	_	ft. after hrs ft. after hrs	_pumping g.p.m.
Coarse Sand			- p	- 66	240	E:	timated maximum yield	9.p.m.
Coarse Sand & Cl	ay	70/30		240	300		ater sample submitted:	
							Yes K No Dat	e
						_	ell head completion: Pitless adapter	Inches above grade
							rill grouted? X Yes	No No
					ļ	D	Neat cement Benton	<u></u>
						14 ト	learest source of possible co	ntamination: Oil IJ
						f.	$\frac{100}{100}$ Direction $\frac{1}{100}$	Type OII W
					<u> </u>	15 P		XNot installed
						٨	Nanufacturer's name	
							Nodel number	
							ength of drop pipe	t. capacity g.m.p.
						_		Turbine
						_] Jet	Reciprocating
	(use	e a second sheet if needed)					Certrifugal	Other
16 Remarks: elevation							ater well contractor's certi	
							his well was drilled under m port is true to the best of m	, ,
Topography:							Carlile Water	,
Hill						В	Box 275.	
Slope						A	igned Edward 6.	Means 4/17
⊠ ©pland □ Vallev						S	Authorized represe	entative
I I VUITEY								

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

Form WWC-5