WATER WELL RECORD KSA 82a-1201-1215

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

	County	Fraction		Section number		Township number Range number			
1. Location of well:	SELLARI)	NE 1/4 NW 1/4 NW	11/4	Ĩ.	· /	T 3/ S	R 34	(D)	
2. Distance and direction from nearest town or city: F25111 Master Ks. 3. Owner R.R. or s				er of well: BROWER WELL SCRUSE					
4. Locate with "X" in section below: Sketch map:						6. Bore hole dia. in. Well depth ft.	Completion date	(- 7/.	
i X	NE 					7 Cable tool Rotary Hollow rod Jetted 8. Use: Domestic Pu X Irrigation Ai	Driven Dug Bored Revers	ustry	
SW S				T		9. Casing: Material	Height: Above or be Surface 2 Weight th Wall Thickness: inch	in. _lbs./ft.	
5. Type and color of material				From	То	Dia in. to ft. depth gage No 10. Screen: Manufacturer's name			
Sueface				0	91	Type Mill-Slot Dia. 16			
F-SAND & Clay Strips				91	171	Slot/gauze			
F to 111 SAND				171	181	Gravel pack? Size range of materialft.			
C. Sano & Rock strips				161	311	11. Static water level: 2.	12 mo./ face Date 3/24/2	[/] day/yr.	
C SAND & GENIEL				211	301	12. Pumping level below land surfaces: ft. after hrs. pumping g.p.m.			
M. SAND & Clay Strips				301	33/	ft. after hrs. pumping g.p.m.			
C. SAND & GRAVE!				331	391	13. Water sample submitted: mo./day/yr.			
MI SAND with clay Stages				391	421				
	SAND BLUE CI			421	451	Pitless adapter 15. Well grouted? With: Neat cement Depth: From	Bentonite Co	k	
						16. Nearest source of possible	contamination:	─	
						ft Direction Well disinfected upon comple		<u>X_</u> No	
						17. Pump: Manufacturer's name Model number	Not installed HP Volts		
						Length of drop pipe	. ,	3.p.m.	
	(Use a second s	heet if needed)				Submersible Jet Centrifugal	Turbine Reciproc Other	ating S	
18. Elevation:	19. Remarks: Lustime R	BAILED WE	11 8	•		20. Water well contractor's c	ertification:	7°	
Topography: — Hill Slope Upland	Peuceo SIME	3				This well was drilled under my is true to the best of my know Business name. Address Signed	•	<u> </u>	
Valley	e and pink copies to the Department	ames Brallie	R		İ	Authorized rep	resentative Form WWC		