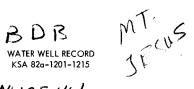
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.



sec 1/4 1/4 1/4 No.

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

		NWSENW				Topeka, Kansas 66620			
1 Location of well:	CLARK	Township name	Fraction		ction number	5	Town number	Range number	
Distance and directi	on from nearest town or ci	ty:	7	3 Owner of w	ell: U	Ill	is Hare	len	
Street address of we	II location if in city:			Address:		75	KLANIT	MANSAS	
Locate with "X" in s	section below:	Sketch map:	BUCK.	INI	,		II depth: 150 ft. I II diameter 28 in.	Date of completion <b>823 7</b>	
	1			3	WAY	. =		Driven Dug Bored Keverse rotary	
w	<b>X</b>		0.4.5	1 -	225,0	$\vdash$	: Domestic Publi		
			EAST	4 miles		7.6	Test well		
No De	1					Thr	eaded Welded	Surface 60 in.	
2	Mile				1_	16	in. to 135 ft. depth	Drive shoe? Yes No	
	· · · · · · · · · · · · · · · · · · ·	e and color of material		Fron		8 Scr	1 / 4 15-1	P	
TOPS	Sail			- 1	18	Тур	nufacturer De	Dia. 16 17	
SANI				3	20		between <b>80</b> ft. and	130 ft	
CLAY				20	65		tings: avel pack 💢 Yes 🗌 No	Size range of materials	
SAX	DY DRI	AUEL		62	78	9 Sta	tic water level: ft. below land surfac	e Date <u>8-23</u> -25	
Rod	C144			78	85	10 Pun	nping level below land su		
Doe.	DZANA	+ C.RAV	EL	85	BO			. pumping g.p.m.	
RE	DBED			13	a)	11 Wa	ter sample submitted:		
				1-	1		Yes No Date 11 head completion:	e	
						<b>-</b>	·	Inches above grade	
							II grouted? (Yes Neat cement) Benton		
	T	0 00 1	30 <sup>′</sup>			<u> </u>	oth: From LLL_ ft. to	He A. Top Clan	
		ROCK 1	<del>30</del>			ft.	arest source of possible co	Туре	
	200	Name of the last o			-	15 Pun	Il disinfected upon compl	etion? Yes No	
			20'sul	Human		Ма	inufacturer's name <i>Fai</i>	a banks Morse	
								HP Volts ft. capacity /\$/@Dg.m.p.	
In F	Muvian					Typ □		Turbine	
	(use	e a second sheet if needed	i)			]	Jet Certrifugal	Reciprocating Other	
16 Remarks: elevat	ion			•		1	ter well contractor's certi	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>							ny jurisdiction and this ny knowledge and belief.	
Topography:	-) (A4			, oʻ	7.	Busi	iness name at 67	License No.	
Slope Upland	7(47	0		195	0, :	1	dress What W	Date &	
Valley	- Z(O)	·		1	(n)		Authorized repres	entative 8-26-75	
Forward the white, bl	lue and pink copies to the	Kansas State Dept. Of He	ealth.	1 4	)			Form WWC-5	