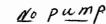
WATER WELL RECORD KSA 82a-1201-1215



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

		r .		1	1 -	
Location of well:		Section number		Township number	Range number	
STEVENS SE 1/4 SE 1/4 S		3			R 37	E/W
				arme Reeder		
Strank address of small languages of the other All to the state of the				St. Kr. Sugoton Kan	11 1 7	
4. Locate with "X" in section below: Sketch map:	(,,,,			V. Bore hole dia. — in.	Completion date 13	-79
N State William State St				↑ Well depth 150 ft.		
1 :				Cable toolRotary		
NW NE				Hollow rod Jetted		
<u>≅</u> w				8 Use: Domestic Public supply Industry Irrigation Air conditioning Stock		
7 j j				Lawn Oil field water Other		
SW SE				Casing: Material Height: Above or below		
<u> </u>				Threaded Welded is. RMP PVC Weight lbs./ft.		
1 Mile ——→I				Dig. 5 in. to 4524t. dep	th!Wall Thickness: inche	es or
5. Type and color of material		From	То	Dia in. to ft. dept		
			. ,	Screen: Manufactorer's n		
gurface		0	10	Type PUC		
Claus		10	40	Slot/gauzeS/oT Set between/3.0		ft.
0 %		40	11/2	ft. a	and	ft.
Dand.		70	79	Gravel pack? Size rail 1X. Static water level:		day/yr.
Clay.		46	60	ft. below land sur		
Clay & Sand		60	85	12. Pumping level below land		
		85	1	ft. after h		3.p.m.
Course granes			105	Estimated maximum yield		g.p.m.
Clay wh line Dand		105	150			lay/yr.
1 1				Yes No 1	Date	
				Pitless adapter	Inches above gr	ade
		 		Well grouted?		ncrete L
				With: Neat cement		1 - 1
				Nearest source of possible	e contamination:	R
				ft Direction		
		-		Well disinfected upon comple Pump:	Not installed	= <u>``</u> ` [
				Manufacturer's name		—l k
				Model number		- 1 (<i>></i>
				Type:	11. cupacityg	J.p.m.
				Submersible	Turbine	ls
(Use a second sheet if needed)				Jet Centrifugal	Reciproco	S (
18. Elevation: 19. Remarks:			-	20. Water well contractor's		7 "
				This well was drilled under m	1 1 -11-11-5	
Topography:				is true to the best of my know	ums deruic	160
— ніі				Besiness name	Licen Dana la 78	se No.
Slope Upland				Address	1 where 6 10	1/79
Valley				Signed Authorized rep	resentative Date	F
Forward the white, blue and pink copies to the Department of Health and Environment					Form WWC	-5 N