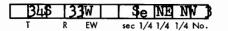
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD KSA 82a-1201-1215



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

	County Township name		Fraction		Section number			Town number	Range number		
1 Location of well:	Seward	SE-NE-NW		NW	3			34S	33W		
Distance and direction from nearest town or city miles north, 1 East ³ Owner of well:							Richard Farmer 1229 Terrace				
Street address of well location if in city: Address						ress:		Liberal, Kansas 67901			
						4 Well depth: 390 ft. Date of completion 11-5-7			, _,-		
Locate with "X" in section below: Sketch map:								II depth: 390 ft. D II diameter in.	ate of completion 11-5	+ /4	
N								Cable tool 🔀 Rotary	Driven Dug	1	
@							Hollow rod Jetted Bored Reverse rotary			<u>v</u>	
w [!] [!] _E							6 Use: X Domestic Public supply Industry			1	
"							☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ※ Stock			'	
							7 Casing: Material PVC Height: above/below			4	
4							Threaded Welded LiSurface 12 in.				
S KUIBERBU							Diam. Weight 2.78 lbs./ft 52 in. to 380 dr. depth Drive shoe? ☐ Yes ▼ No				
2	T				F	T.		in. to ft. depth	Wite shoet [] les [[] l		
	Тур	e and color of material			From	То	8 \$c				
Surface					0	3	Mo Tvi	inufacturer WESCO	oia536		
					_	- 0	Sic	gauze <u>•030</u> L	ength		
Fine Sand and Brown clay					3	18		between _380 ft. and tings:	190_fr 114-3/16	4	
Brown clay					18	158		avel pack 🔀 Yes 🗌 No	Size range of material —	.]	
Brown clay and gravel					158	179	9 Sto	tic water level:	77 (* 12)		
								5_ft. below land surface		4	
San	d and gravel	with brown cl	ау		179	237		mping level below land sur ft. after hrs.			
Sand and gravel with brown clay streaks					237	390	_	ft. after hrs	Gumping g.p.m		
	A STANGT	MTAII NI AMII AT	- 3 - 3 - 11 - 4 - 4		-) (-	7,00		imated maximum yield	g.p.m.	4	
							_	iter sample submitted: Yes 🔽 No Date	·		
							12 We	Il head completion:		1	
									2 Inches above grade	4	
,							13 Well grouted? 🔀 Yes 🔲 No 🛣 Neat cement 🔲 Bentonite 🔲				
							De	pth: FromO_ ft. to .	10 ft.	-	
							14 Ne	earest source of possible co	ntamination: NONE	7	
							ft.	Direction ————————————————————————————————————	trion? Yes	-	
							15 Pu		Not installed	1	
								anufacturer's name	<u> </u>	-	
							l	odel number h ngth of drop pipe f		-	
						<u> </u>	Ţу	pe:	_		
							_	Submersible [Jet [TurbineReciprocating		
	(use	a second sheet if needed)					. =	Certrifugal [Other		
16 Remarks: elevation								ater well contractor's certif			
							I .	is well was drilled under m port is true to the best of m	•		
Тородгарну:								arlile Water V	, .		
							Business name Roy 275 Tibonal Ke				
☐ Slope ☑ Upland							Ac Si	Signed Edward E. Meone Date 11-20-7			
Valley							319	Authorized represe		- I	

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

Form WWC-5