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

WATER WELL RECORD KSA 82a-1201-1215

1	1	-	R	EW	sec	1/4	1/4	1/4	No.

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	Liberal SI	NHNE	SW		14		T355	R34W			
Distance and directi	Distance and direction from nearest town or city: 3 Owner of well:											
Street address of well location if in city: Address:							R+ 1					
Locate with "X" in section below: Sketch map:							Liberal, Kansus 4 Well depth: 240 ft. Date of completion 21/15					
Locale with X iii	N	Skeren nap.					Well diameter in.					
								5 Cable tool Rotary Driven Dug				
								Hollow rod Jetted Bored Reverse rotary				
w								6 Use: MD Domestic Public supply Industry Irrigation Air conditioning Commercial Test well				
							7 Casing: Material RMP Height: <u>above</u> /below Threaded Welded Surface <u>16</u> in. Diam. Weight <u>320</u> Hbs./#					
-	5											
	Mile -						5 in. to 200ft. depth Drive shoe? Yes No					
2	Тур	e and color of material			From	То	8 Scr	99D:				
Overbo	r de p				0	78	Manufacturer SEL					
0 1	X1.0(1)							Type <u>RmP</u> Dia. <u>5</u> Slot/gauze <u>///6</u> Length <u>40</u>				
Clay_					78	180	Set between 200 ft. and 240 ft.					
Medin	m Sand a	id Clay			180	205	Gravel pack 🔀 Yes 🗌 No Size range of materia					
Coarse	Sand in	& Clay			205	240	9 Sta	tic water level: the below land surface	8/27/25			
					<u>au </u>	,,,		nping level below land surface				
				—		-	_	ft. after hrs.	pumping g.p.m.			
								ft. after hrs. mated maximum yield				
								ter sample submitted:				
								Yes No Date				
							_	· -	/6 Inches above grade			
								II grouted? ☑ Yes Neat cement ☐ Bentonit	□ No			
								3_ft.				
							14 Ne	ntamination:				
							We	Il disinfected upon comple	tion? Yes No			
							15 Pur	•	Not installed			
								inufacturer's name odel number H	IP Volts			
							Ler	ngth of drop pipe fi				
								pe: Submersible [Turbine			
							_	Jet [Reciprocating Other			
(use a second sheet if needed) 16 Remarks: elevation								Certrifugal L ter well contractor's certif				
TO ROBBIAS: CICYCHOT							Thi	s well was drilled under my	y jurisdiction and this			
Topography: Well to be Completed by:								ort is true to the best of my	-			
Slope Andrews Water Well Service								Towworder Will Service Disconnection Business name Licen Address Box 8/6 Liberral NS				
								aned CD. Wayne	Date 8/23/25			
Valley		Liberal, 1	rs.					Authorized represe				