WATER WELL RECORD KSA 82a-1201-1215

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

	County Fraction Stevens 58 1/4 N W/4 SC			Section number		Township number	Range number		
1. Location of well:			SW1/4	1	/	7 35	s R 36	E/W	
2. Distance and direction from nearest town or city: 7 H EAST 3. Own 1034 South of H U Gotov Street address of well location if in city:				er of well: L. D. Gouch					
4. Locate with "X" in section below: Sketch map:						6. Bore hole dia, 25 in. Completion date			
NW NE						7 Cable tool 🔏 Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary			
W						8. Use:Domestic Public supply Industry			
s							Surface	in. lbs./ft.	
5. Type and color of material				From	То	Dia in. to ft. de			
,,,,						10. Screen: Manufacturer's name			
Overburden				n	2	Type Stoe	_ Dia	380	
Top Soil				2	180	Set between262	_ft. and _642	ft.	
Fine Sd. & Clay				180	_280	Gravel pack? Size range of material 18 - 14			
Med. Sd., Clay & Rook				280	420	11. Static water level:ft. below land s		./doy/yr. 2-22	
Med. & Coarse Sd.				420	600	12. Pumping level below land surfaces: VH ft. after hrs. pumping g.p.m.			
Med. & Fine Sd. w/Red Clay Strks.				600	640	1 66 1 1			
Red & Bine Cisy			640	650	13. Water sample submitted Yes No		./day/yr.		
						14. Well head completion:	Inches above	grade	
	**************************************	all and the second seco				15. Well grouted? 455 With: Neat cement _	Bentonite		
· · · · · · · · · · · · · · · · · · ·	-				***	Depth: From ft. to			
						ft Direction Well disinfected upon comp		V_N₀	
						17. Pump: Manufacturer's name	Not installed		
						Model number	— HP — Vo — ft. capacity —		
						Type: Submersible	Turbin	1	
(Use a second sheet if needed)						Jet Reciprocating Other			
18. Elevation:	19. Remarks:	16 A CROP LAN	1			20. Water well contractor! This well was drilled under		report	
Topography:						is true to the best of my kno KTM DRILLIN	owledge and belief.	225	
Hill Slope Upland						Signed No.	Date Date	ense No.	
Valley	e and nink conies to the Denc	rtment of Health and Environmer				Authorized r	epresentative Form WV		