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

ROQUE B 2/ 8 NOSC Sch.

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

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

WATER WELL RECORD
ASA 82a-1201-1215

1 Location of well:		Township name	Fraction 5 / /	w KI	Section number		′	Town number	Range number	
Distance and direction from nearest town or city: NoBTh 3 Owner of well: EMMIT KING										
								BOGUE KS		
Locate with "X" in section below: N								4 Well depth: 48 ft. Date of completion 7-10-72 Well diameter 8 in.		
							5 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary			
W							6 Use: Domestic Public supply Industry Irrigation Air conditioning Commercial Test well			
S							7 Casing: Materia Materi			
2 Type and color of material						То	in. to ## ft. depth Drive shoe? Yes No			
SANd					0	28	8 Screen: Manufacturer SUNFlowER Type SAW Dia. 5 Slot/gauze Length Set between 38 ft. and 48 ft.			
SAND & GRAUE/					28	47				
SHALE					417	48	Fitti	ngs:	Size range of material	
BROCK 47'							9 Stati	c water level: 2 ft. below land surface	e Date <u>5-10-76</u>	
24'									. pumping g.p.m.	
23 sat thick							l .	ft. after hrs ated maximum yield	. pumping g.p.m.	
NOT IN OS							11 Wate	er sample submitted: es No Dat	e	
							1	head completion: itless adapter	Inches above grade	
							13 Well Dept	grouted? X Yes leat cement Benton h: From Ft. to	No ite ft.	
							14 Near	est source of possible co Direction disinfected upon compl	entamination: Type etion? Yes No	
							15 Pump		Not installed	
							Mod	el number	HP Volts ft. capacity g.m.p.	
							Type	: ubmersible Jet	Turbine Reciprocating	
(use a second sheet if needed) 16 Remarks: elevation								Certrifugal r well contractor's certi	Other	
Topography: XHill XSlope	•	70 7	5	X:			геро	A RRE/	y jurisdiction and this y knowledge and belief. N IN UN 29 License No.	
Upland Valley		791	~ ~			÷	Signe	Authorized represe	Date	

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

Form WWC-5