

GRINELL NE

WATER WELL RECORD
KSA 82a-1201-1225
CDB

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

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

r		·						, · · · · · · · · · · · · · · · · · · ·		-
1 Location of well:	County	Township name	∑4_555°1 /4	,	Section	on number	r	Town number	Range number	
	Sheridan	Springb	rook NW 1/4	<u> </u>		36		9	29	
Distance and direction	on from near town or ci	y: 7% north		3 Owne	er of well			ie F. Pratt		
Street address of well location than the Grainfield, Kansas					635 Lane St. Address: Fort Morgan, Colorado				nada	
	*			L	···					75
Locate with "X" in s	section below: N	Sketch m	ap:				4 Wei Wel	I depth: 140 ft. [I diameter 20 in.	Date of campletion 3=22	13
	1 ! !						5 🔲	Coble tool 🗌 Rotary 🏻 [Driven Dug	
	ii								Bored Reverse rotary	<u>.</u>
w	. <u>\</u>				6			: Domestic Public		
								Test well	onditioning Commercial	
	11						7 Casi	ing: Material stee	teight: above/below	1
	1 1 1,						Thre	m. 12 3/4	iurface 12 in.	
	S Mile						Dia	m. 12 3/4 N	Weight <u> </u>	
2	Tvp	e and color of mater	ial		From	То	-	_ in. toft. depth	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
							8 Scre	een: nufacturer W. A.	Brown	
Top soil		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		0	70	TVD	Luver	$_{\rm lig}$, 12 3/4	ļ
Clay, fine	e sand, Med gr	ravel, red	i		70	75		/gauze 7 = 1/8L between 106 ft. ond		
Fine, sand, Med gravel red					75	96	Fitt	ings:	Size range of materia	x 5/8
0-1-7					<u> </u>		ı	iç water level:		
Sandy clay	7				96	100		5_ ft. below land surface	Date 1-20-75	ĺ
Fine sand, clay, med. gravel red					100	114		ping level below land sur	faces: pumping <u>300</u> g.p.m.	
Sandy clay					114	118		ft. after hrs.	pumping g.p.m.	
					440	1 21.		nated maximum yield 30 er sample submitted:	Q g.p.m.	
Clay, fine sand med gravel red					118	134		· —		
Clay, med	gravel streal	cs of lime	stone		134	145	_	I head completion:		
Ochre, sha	ale				145	150			Inches above grade No	
	KRI	XK 145'						Neat cement 🔲 Bentoni	te 🗆	
		201 112					Dept	th: From O ft. to 1	O ft.	
							14 Neo	rest source of possible car	ntamination:	
							Wel	I disinfected upon comple	Type None	
							15 Pum	P: [Not installed	
								nufacturer's name <u>GOI</u> del number XO 10+	1]ds <u>20 </u>	
									. capocity 300g.m.p.	
							Тури	_	Turbine	
						\vdash	▎ᡖ		Reciprocating	
	(use	a second sheet if ne	eded)					Certrifugal [Other	
16 Remarks: elevati		^	`				1	er well contractor's certif		
	797	7 (Tip	PO)				I	well was drilled under my ort is true to the best of my	•	
Topography: ZSZZ (TOPO)							Bln	e Jay Drillin		4
∐ Hill ☐ Slope	270	U					Busin	ness name ress Colby Kar	License No.	
∑ Upland	• • •							od marilyn	Pall 5.3-27-7	5
Valley								Authorized represe	ntățive	l

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

Form WWC-5