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

WATER WELL RECORD
KSA 82a-1201-1215

ABA ABB

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

1. Location of well: County Leavenworth Fraction NW ^{NE} 1/4 ^{1/4} NW 1/4 NE 1/4 Section number 16 Township number T 10 S R 22 Range number 22 (E/W)	
2. Distance and direction from nearest town or city: 1 1/2 miles west of Fairmount, Kansas	
3. Owner of well: Mr. Raymond Wright Basehor, Kansas R.R. or street: City, state, zip code:	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
Top Soil	From 0 To 2
Clay	2 15
Sandy Clay	15 37
Sand & Gravel	37 51
Sandstone	51 125
(Use a second sheet if needed)	
6. Bore hole dia. <u>5</u> in. Completion date 9-18-78 Well depth 125 ft.	7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary
8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	9. Casing: Material <u>PL</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>126</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. <u>.265</u>
10. Screen: Manufacturer's name (Slotted Pipe) Vinylplex, Inc. Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>06 1/16</u> Length <u>40+</u> Set between <u>80</u> ft. and <u>120</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 - 1/8</u>	11. Static water level: <u>32</u> ft. below land surface Date 9-18-78 12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <u>15</u> g.p.m.
13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>18</u> Inches above grade
15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>15</u> ft.	16. Nearest source of possible contamination: <u>200'</u> Direction <u>SW</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Jacuzzi</u> Model number <u>5S4B</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe <u>115</u> ft. capacity <u>10</u> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. BREUER, INC. 174 Business name License No. Address <u>Box 147, Basehor, Ks.</u> Signed <u>[Signature]</u> Date <u>10-3</u>
18. Elevation: <u>9453</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:

10 220 16 NW NE 1/4 1/4

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

BR elev = 894 Δ = 918

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