

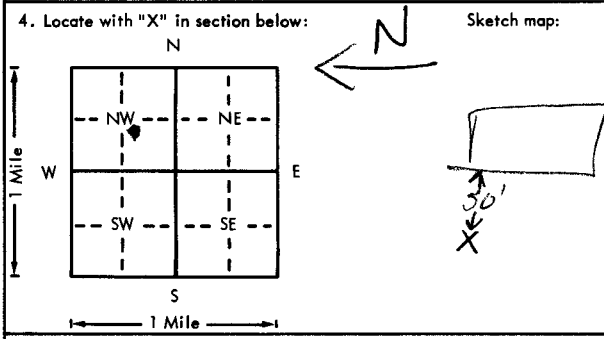
171

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BDB

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

WATER WELL RECORD
KSA 82a-1201-1215

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

1. Location of well:		County Leavenworth	Fraction NW 1/4 SE 1/4 NW 1/4	Section number 32	Township number T 10 S R 22	Range number 22	(E/W)
2. Distance and direction from nearest town or city: 3 miles west of Basehor, Kansas				3. Owner of well: Mr. Doyle McHenry R.R. or street: 3427 N. 57th City, state, zip code: Kansas City, Kansas			
4. Locate with "X" in section below: 				6. Bore hole dia. 8 in. Completion date 8-27-76 Well depth 120 ft.			
5. Type and color of material				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 PL Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 0 in. to 121 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 258			
				10. Screen: Manufacturer's name (SLOTTED PIPE) Vinylplex, inc. Type PVC Dia. <input type="checkbox"/> Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/> Set between 55 ft. and 64 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 - 1/8			
				11. Static water level: <input type="checkbox"/> mo./day/yr. 41 ft. below land surface Date 8-27-76			
				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 1 1/2 g.p.m.			
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>			
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 18 inches above grade			
				15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 23 ft.			
				16. Nearest source of possible contamination: ft. 100 Direction west Type septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe 120 ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
18. Elevation: 876 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> <input type="checkbox"/> Slope <input type="checkbox"/> <input type="checkbox"/> Upland <input type="checkbox"/> <input type="checkbox"/> Valley <input type="checkbox"/>				19. Remarks: 880 ft from map RM			
				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 Box 117 Basehor, Ks. 66007 Signed [Signature] Date <input type="checkbox"/> Authorized representative			

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

Form WWC-5

BR elev = 876 I = 275

10 22 32 NW SE NW
1/4 1/4 1/4