MH #1 INSTALL

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

MH #1 Install

WATER WELL RECORD
KSA 82a-1201-1215

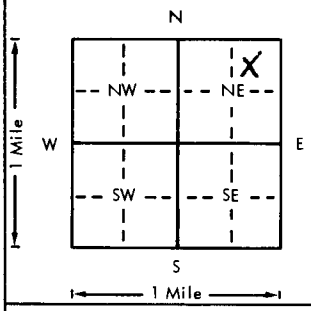
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Wyandotte	NE 1/4 NE 1/4 NE 1/4	23	T 10 S	R 24 E/W

2. Distance and direction from nearest town or city: 3 MI. - Kansas City Ks.
Street address of well location if in city:

3. Owner of well: Moretrench - American
R.R. or street: 5200 Katrine
City, state, zip code: Downers Grove, Ill 60515

4. Locate with "X" in section below:



Sketch map:

BPU Office

6. Bore hole dia. 12 in. Completion date 4-6-79
Well depth 27 ft.

7. __ Cable tool __ Rotary __ Driven __ Dug
__ Hollow rod X Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water X Other

9. Casing: Material Steel
Threaded X Welded ____
RMP ____ PVC ____
Dia 12 in. to 23 ft. depth
Dia. ____ in. to ____ ft. depth
Height: Above or below Surface 12 in.
Weight 2.72 lbs./ft.
Wall Thickness: inches or gage No. .40

5. Type and color of material	From	To
Brown Clay	0	20
Fine - Medium Sand	20	24
		26

(Use a second sheet if needed)

10. Screens: Manufacturer's name M.T.A
Type Mesh Dia. 1½"
Slot/gauze ____ Length 3'
Set between 26 ft. and 23 ft.
____ ft. and ____ ft.
Gravel pack? ____ Size range of material ____

11. Static water level: 24 ft. below land surface Date 4-6-79 mo./day/yr.

12. Pumping level below land surfaces:
____ ft. after ____ hrs. pumping ____ g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield ____ g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date ____

14. Well head completion:
NO pitless adapter ____ Inches above grade

15. Well grouted? YES
With: ____ Neat cement X Bentanite ____ Concrete
Depth: From 10 ft. to 0 ft.

16. Nearest source of possible contamination:
ft. 1000 Direction N Type River
Well disinfected upon completion? ____ Yes X No

17. Pump: ____ Not installed
Manufacturer's name None
Model number ____ HP ____ Volts ____
Length of drop pipe ____ ft. capacity ____ g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

T ____ R ____ E/W ____ Sec ____ 1/4 ____ 1/4 ____ 1/4 ____

18. Elevation: 752
Topography:
__ Hill Flat
__ Slope Land
__ Upland
X Valley

19. Remarks: Jetted 10 wellpoints Around MH #1
All Same Material

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.
Business name Moretrench - American License No. ____
Address 5200 Katrine, Downers Grove Ill
Signed J. Wogney Date 4-16-79
Authorized representative

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

Form WWC-5

MI-1023