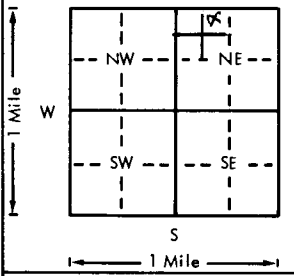


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 WYANDOTT	Fraction NE NW NE 1/4 1/4 1/4	Section number 23	Township number T 10 South S	Range number R 24 EAST E/W
2. Distance and direction from nearest town or city: 2 MILES NORTH OF KANSAS CITY, KANSAS Street address of well location if in city: ALDENMAN POWER PLANT			3. Owner of well: SHARP BROS INC R.R. or street: 1014 E 19th ST City, state, zip code: KANSAS CITY, MO 64108		
4. Locate with "X" in section below: Sketch map: N 			6. Bore hole dia. 30 in. Completion date 10-28-78 Well depth 30 ft.		
5. Type and color of material			7. <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
			8. Use: <input 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 checked="" type="checkbox"/> Other		
			9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 18 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 2 in. to 30 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. SEH 40		
			10. Screen: Manufacturer's name DJC - SAW CUT Type SAW CUT Dia. 2" Slot/gauze .040 Length 10' Set between 20 ft. and 30 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/8 GR		
Chay			From	To	11. Static water level: _____ mo./day/yr. 19 ft. below land surface Date _____
FINE SAND			12	24	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.
FINE SILTY SAND			24	29	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
MED SAND			29	30	14. Well head completion: <input type="checkbox"/> Pitless adapter 18 inches above grade
					15. Well grouted? <input type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 4 ft. to 8 ft.
					16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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
					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. MASTERS OF AMERICAN LEAD Business name _____ License No. _____ Address Downers Grove, Ill Signed [Signature] Date 2-79 Authorized representative
18. Elevation:			19. Remarks: PIEZOMETER.		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

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

Form WWC-5