ck 32

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

Couldn't find undeveloped?

6/2/82 probably wrong card for well

WATER WELL RECORD
KSA 82a-1201-1215

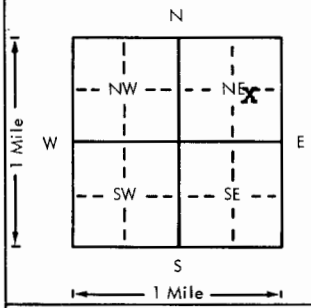
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Leavenworth	NW 1/4 SE 1/4 NE 1/4	14 (11?)	T 11 S	R 21 (0) E/W

2. Distance and direction from nearest town or city: 2 miles east of Tonganoxie, Kansas
Street address of well location if in city:

3. Owner of well: Ray Dillon, Builder
R.R. or street: Basehor, Kansas
City, state, zip code: Tract #3 Parker Property

4. Locate with "X" in section below:



Sketch map:

5. Type and color of material	From	To
Clay	0	20
Sandstone	20 XX	58
Lime	58	60

(Use a second sheet if needed)

6. Bore hole dia. 8 in. Completion date 10-20-78
Well depth 60 ft.

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

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

9. Casing: Material PL. Height: Above or below
Threaded ___ Welded X Surface — 18 in.
RMP ___ PVC X Weight ___ lbs./ft.
Dia. 5 in. to 61 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .265

10. Screen: Manufacturer's name (Slotted Pipe) Vinyliplex, Inc.
Type PVC Dia. 5"
Slot/gauze .06 1/16 Length 20'
Set between 40 ft. and 60 ft.
___ ft. and ___ ft.
Gravel pack? X Size range of material 1/4-1/8

11. Static water level: mo./day/yr.
20 ft. below land surface Date 10-20-78

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 35 g.p.m.

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

14. Well head completion:
X Pitless adapter 18 Inches above grade

15. Well grouted? Yes
With: X Neat cement __ Bentonite __ Concrete
Depth: From 3 ft. to 15 ft.

16. Nearest source of possible contamination:
ft. 200 Direction south Type septic
Well disinfected upon completion? X Yes __ No

17. Pump: X Not installed
Manufacturer's name
Model number HP Volts
Length of drop pipe ft. capacity g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:
Topography:
__ Hill
__ Slope
__ Upland
__ Valley

19. Remarks:

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 147, Basehor, Ks.
Signed [signature] Date 1/20/79
Authorized Representative

T 11 R 21 W Sec 14 1/4 NW 1/4 SE 1/4 NE

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

Form WWC-5