

Tonganoxie

R

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 S W S E N W SE 1/4 SW 1/4 NE 1/4	Section number 15	Township number 11 T S R	Range number 21 E W		
2. Distance and direction from nearest town or city: 1/2 mi. south Street address of well location if in city: 3/4 east of Tonganoxie			3. Owner of well: Mr. Fred Stewart R.R. or street: Route 3 City, state, zip code: Tonganoxie, Kansas					
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 8 in. Completion date 9-5-75 Well depth 127 ft.				
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug</td> </tr> <tr> <td><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary</td> </tr> <tr> <td>8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry</td> </tr> <tr> <td><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock</td> </tr> <tr> <td><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other</td> </tr> </table>		7. 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
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5. Type and color of material		From	To	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 _____ lbs./ft. Dia. 5 in. to 60 ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. 258 WT				
Sandy Top Soil - Yellow		0	1	10. Screen: Manufacturer's name NONE OPEN HOLE				
Clay - Yellow		1	4	Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____				
Sandstone - Yellow		4	80	11. Static water level: _____ mo./day/yr. 50 ft. below land surface Date 9-5-75				
Sandstone - Gray		80	120	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield over 10 g.p.m.				
Lime - White		120	127	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____				
				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 0 ft. to 50 ft.				
				16. Nearest source of possible contamination: ft. 100 Direction SE Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
				17. Pump: _____ Not installed Manufacturer's name Jacuzzi Model number 5SLB HP 1/2 Volts 230 Length of drop pipe 105 ft. capacity 10 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 DRILLING CO. 174 Business name _____ License No. _____ Address Box 147 Basehor, Ks. 66008 Signed [Signature] Date 9-15-75 Authorized representative				
18. Elevation: 895	19. Remarks:							
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley								

11 21 W 15 SE 1/4

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

Form WWC-5

BR elev = 891 $\nabla = 845$