

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

NW SE

1. Location of well:	County <b>Leavenworth</b>	Fraction <b>SE 1/4 <del>NW</del> SE 1/4</b>	Section number <b>19</b>	Township number <b>T 11 S R 21</b>	Range number <b>EW</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:	<b>1 1/2 miles south west of Tonganoxie</b>		3. Owner of well: <b>Mrs. Vernon Williams</b> R.R. or street: <b>RRI</b> City, state, zip code: <b>Tonganoxie</b>		
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <b>8</b> in. Completion date <b>6-12-77</b> Well depth <b>300</b> ft.		
5. Type and color of material	From	To	7. <input checked="" 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 type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
<b>Top soil.</b>	<b>0</b>	<b>2</b>	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		
<b>yellow clay.</b>	<b>2</b>	<b>6</b>	9. Casing: Material <b>stym</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>300</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>250</b>		
<b>Line Rock.</b>	<b>6</b>	<b>12</b>	10. Screen: Manufacturer's name <b>slotted</b> <b>casin</b> Type <input type="checkbox"/> Dia. <input type="checkbox"/> Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/> Set between <b>250</b> ft. and <b>300</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/2 X 3/4</b>		
<b>shale.</b>	<b>12</b>	<b>16</b>	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>160</b> ft. below land surface Date <b>6-15-77</b>		
<b>Line Rock.</b>	<b>16</b>	<b>23</b>	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 <b>5</b> g.p.m.		
<b>shale.</b>	<b>23</b>	<b>110</b>	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
<b>Line.</b>	<b>140</b>	<b>145</b>	14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> <b>undergrad dis.</b> inches above grade		
<b>shale.</b>	<b>145</b>	<b>285</b>	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>3</b> ft. to <b>13</b> ft.		
<b>early shale</b>	<b>285</b>	<b>290</b>	16. Nearest source of possible contamination: ft. <b>110</b> Direction <b>north</b> Type <b>septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>shale.</b>	<b>290</b>	<b>300</b>	17. Pump: Manufacturer's name <b>dropster</b> Not installed Model number <input type="checkbox"/> HP <b>3/4</b> Volts <b>220</b> Length of drop pipe <b>290</b> ft. capacity <b>5</b> 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		
(Use a second sheet if needed)			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. <b>Kenneth Schief</b> <b>212</b> Business name License No. Address <b>Baldwin, Kansas</b> Signed <b>Kenneth Schief</b> Date <b>7-7-77</b> Authorized representative		
18. Elevation: <b>1000</b> <b>1005</b> Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <b>Owner take care of top of well.</b>				

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

Form WWC-5

BR color: 9984

7 = 845