

1235

A

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

ACC

1. Location of well:	County Leavenworth	Fraction SW 1/4 NE 1/4 SE 1/4	Section number 8	Township number T 11S	Range number S R 22E	E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: John Miller - Builder R.R. or street: 114 Rolling Hills Road City, state, zip code: Bonner Springs, Kansas			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 		6. Bore hole dia. 8 in. Completion date _____ Well depth 110 ft.	
5. Type and color of material			From	To	7. <input checked="" type="checkbox"/> 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	
Top Soil - Dark			0	1	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	
Clay - Yellow-			1	14	9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 79 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 320	
Coal - Black			14	17	10. Screen: Manufacturer's name _____ NONE Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____	
Shale - Blue			17	20	11. Static water level: _____ mo./day/yr. 72 ft. below land surface Date 10-10-75	
Coal-Black			20	21	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 1/2 g.p.m.	
Sandstone - Gray			21	30	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
Shale - Blue			30	34	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 18 inches above grade	
Sandstone - Gray			34	38	15. Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Cemented With: <input checked="" type="checkbox"/> Neat cement 1 1/2 ft. to 72 ft. <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 72 ft.	
Shale - Blue			38	45	16. Nearest source of possible contamination: ft. 80 Direction east Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Sandstone - Gray			45	50	17. Pump: _____ Not installed Manufacturer's name Jacuzzi Model number 5SLB HP 1/2 Volts 230 Length of drop pipe 75 ft. capacity _____ 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	
Shale - Blue			50	57	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 COMPANY 174 Business name _____ License No. _____ Address Box 147, Basehor, Kansas Signed Ray Breuer Date 10/28/75 Authorized representative	
Sandstone - Gray			57	62		
Shale - Blue			62	68		
Sandstone - Gray			68	78		
Shale - Blue			78	81		
(Use a second sheet if needed)						
18. Elevation: 821.3 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> 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 DRILLING COMPANY 174 Business name _____ License No. _____ Address Box 147, Basehor, Kansas Signed Ray Breuer Date 10/28/75 Authorized representative			

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

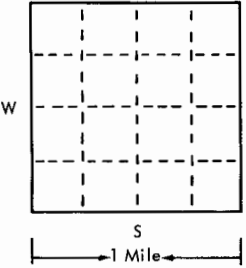
Form WWC-5

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

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

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