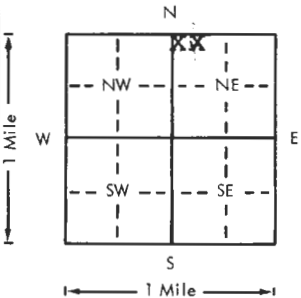


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <b>Leavenworth</b>	Fraction <b>SE NW</b> <b>NW 1/4 NW 1/4 NE 1/4</b>	Section number <b>12</b>	Township number <b>T 11 S R 22 EW</b>	Range number <b>22</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:		<b>1 1/2 mile east of Basehor, Kansas</b>		3. Owner of well: R.R. or street: City, state, zip code:		
				<b>Mr. Jim Gramling 10312 W. 48th Terrace Shawnee, Kansas 66203</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8</b> in. Completion date <b>7-10-78</b> Well depth <b>100</b> ft.		
				7. <input 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		
				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		
				9. Casing: Material <b>PL</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>102</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. <b>265</b>		
5. Type and color of material		From To		10. Screen: Manufacturer's name <b>(Slotted Pipe) Vinylplex, Inc.</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>.06 1/16</b> Length <b>4'</b> Set between <b>18</b> ft. and <b>22</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4 - 1/8</b>		
<b>Silt</b>		0 5				
<b>Soft Silt</b>		5 19				
<b>Sand, Rock, &amp; Gravel</b>		19 21				
<b>Lime</b>		21 65		11. Static water level: <b>12</b> ft. below land surface Date <b>7-10-78</b>		
<b>Slate</b>		65 68		12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>15</b> g.p.m.		
<b>Lime</b>		68 70		13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
<b>Shale (Light Green)</b>		70 79		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>18</b> inches above grade		
<b>Lime</b>		79 97		15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>3</b> ft. to <b>12</b> ft.		
<b>Shale</b>		97 100		16. Nearest source of possible contamination: <b>Creek Creek</b> ft. Type <b>east</b> Direction <b>east</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: Not installed Manufacturer's name <b>Jaeuzzi</b> Model number <b>5S4B</b> HP <b>172</b> Volts <b>220</b> Length of drop pipe <b>90</b> ft. capacity <b>10</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		
18. Elevation: <b>840</b> Topography: <b>830</b> <b>hills</b> <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. <b>BREUER, INC.</b> <b>174</b> Business name <b>Box 147, Basehor, Kas.</b> License No. Address Signed <b>Robert M. Breuer</b> Date <b>7/11/78</b> Official representative		

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

Form WWC-5