

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

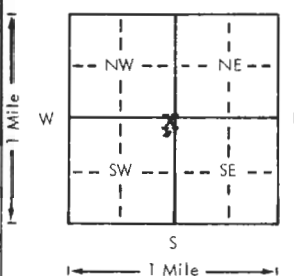
WATER WELL RECORD  
KSA 82a-1201-1215

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

1. Location of well: County **Leavenworth** Fraction **NE 1/4 NE 1/4 SW 1/4** Section number **11** Township number **11** Range number **22** **E/W**

2. Distance and direction from nearest town or city: **4 1/2 miles east & 1 1/2 mile south of Tonganoxie, Kansas**

3. Owner of well: **Mr. Richard Kemler**  
R.R. or street: **Box 77**  
City, state, zip code: **Basehor, Kansas**

4. Locate with "X" in section below: Sketch map: 

5. Type and color of material

	From	To
Top Soil	0	3
Sandstone	3	11
Sandy <del>XXX</del> Clay	11	19
Shale	19	22
Sandstone	22	60
Line	60	63
Shale	63	69
Lime	69	80

6. Bore hole dia. **8** in. Completion date **5-24-79**  
Well depth **80** ft.

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

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

9. Casing: Material **PL**, Height: Above or below  
Threaded ☐ Welded ☒ Surface **18** in.  
RMP ☐ PVC ☒ Weight ☐ lbs./ft.  
Dia. **6** in. to **27** ft. depth Wall Thickness: inches or  
Dia. ☐ in. to ☐ ft. depth gage No. **280**

10. Screens: Manufacturer's name **NONE**  
Type ☐ Dia. ☐  
Slot/gauze ☐ Length ☐  
Set between ☐ ft. and ☐ ft.  
☐ ft. and ☐ ft.  
Gravel pack? **NONE** range of material ☐

11. Static water level: **45** ft. below land surface Date **5-24-79** mo./day/yr.

12. Pumping level below land surfaces:  
☐ ft. after ☐ hrs. pumping ☐ g.p.m.  
☐ ft. after ☐ hrs. pumping ☐ g.p.m.  
Estimated maximum yield **2 1/2** g.p.m.

13. Water sample submitted: ☐ Yes ☒ No Date ☐ mo./day/yr.

14. Well head completion:  
☒ Pitless adapter **18** inches above grade

15. Well grouted? **Yes**  
With: ~~xx~~ Neat cement ☐ Bentonite ☐ Concrete  
Depth: From **3** ft. to **15** ft.

16. Nearest source of possible contamination:  
ft. **150'** Direction **north** type **septic**  
Well disinfected upon completion? ☒ Yes ☐ No

17. Pump: ☐ Not installed  
Manufacturer's name **Jacuzzi**  
Model number **5S4B** HP **1/2** Volts **220**  
Length of drop pipe **70** ft. capacity **10** g.p.m.  
Type:  
☒ Submersible ☐ Turbine  
☐ Jet ☐ Reciprocating  
☐ Centrifugal ☐ Other

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

19. Remarks: (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.  
**BREUER, INC.** **174**  
Business name **Box 147, Basehor, Ks.** License No. **561**  
Address **Basehor, Ks.**  
Signed **Richard Kemler** Date **5/24/79**  
Authorized representative

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

Form WWC-5