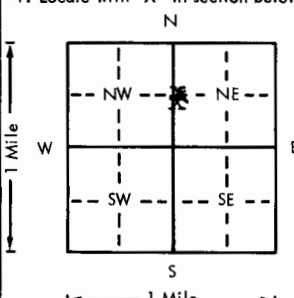


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 NW 1/4 SW 1/4 NE 1/4	Section number 7	Township number T 12 S R 22 E/W	Range number
2. Distance and direction from nearest town or city: 2 miles north-west of Linwood, Ks.				3. Owner of well: Mr. William F. Schaal R.R. or street: Box 1550 City, state, zip code: Linwood, Kansas		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. 8 in. Completion date 10-23-76 Well depth 60 ft.		
5. Type and color of material				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 Steel Weight: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 5 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 6 in. to 9 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 188		
				10. Screen: Manufacturer's name NONE Type <input type="checkbox"/> Dia. <input type="checkbox"/> Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/> Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input type="checkbox"/> Size range of material <input type="checkbox"/>		
				11. Static water level: 15 ft. below land surface Date 10-23-76 mo./day/yr.		
(Use a second sheet if needed)				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 3 after shot g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				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 3 ft. to 13 ft.		
				16. Nearest source of possible contamination: ft. 300 Direction south Type septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				17. Pump: Manufacturer's name Jacuzzi Not installed Model number 5S4B HP 1/2 Volts 220 Length of drop pipe 20 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, INC. 174 Business name License No. Address Box 147 Basehor, Kansas Signed [Signature] Date 11-16-76 Authorized representative		
				19. Remarks: 15 gallon per hour before shot 3 gallon p.m. after shot 950 gallons storage		

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

Form WWC-5