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

Try phone book water Well RECORD
KSA 820-1201-1215

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

Range number Section number Township number 1. Location of well: SE 1/4 SE 1/4 SE 1/4 Leavenworth 12 2. Distance and direction from nearest town or city: 1 mile west of 3. Owner of well: Lawrence Givens Route 1, Box 108 R.R. or street: Street address of well location if in city: LaNape, Kansas City, state, zip code: Linwood, Kansas 6. Bore hole dia. 45 in. Completion date Well depth 4. Locate with "X" in section below: Sketch map: 7. __ Cable toolXX Rotary __ Driven __ Dug _ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary 8. Use XX Domestic __ Public supply __ Industry __ Irrigation __ Air conditioning __ Stock ___ Lawn ___ Oil field water 9. Casing: Material ___PL_Height: Above or below Threaded ____ Welded ___ ISurface ___ RMP ___ PVC ___ Weight ___ Dia. 5 in. to 45 ft. depth Wall Thickness: inches or 1 Mile Dia. ___ in. to ___ ft. depth gage No. ___ 5. Type and color of material 10. Screen: Manufacturer's name (Slotted Vinylplex, Inc. Silt 0 25 Slot/gauze __05 25 Sand & Gravel 30 30 45 Lime Gravel pack? XX_ Size range of material. 11. Static water level: 20 ft. below land surface Date 12. Pumping level below land surfaces: ____ ft. after _____ hrs. pumping _ ft.after _ Estimated maximum yield _ 13. Water sample submitted: Yes X No Date 14. Well head completion: 18 Inches above grade Pitless adapter 15. Well grouted? Yes With Neat cement _ 16. Negrest source of possible contamination:
ft. 100 Direction South, pe septic Well disinfected upon completion? XX Yes 17. Pump: X Not installed Manufacturer's name _ ___ HP _____ Volts Model number ___ Length of drop pipe ___ __ ft. capacity _____g.p.m. Type: _ Turbine ____ Submersible Reciprocating ____ Jet Centrifugal (Use a second sheet if needed) 20. Water well contractor's certification: 18. Elevation: 19. Remarks: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. BREUER, INC. Topography: ___ Hill Slope Upland Valley

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