

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

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		<u> </u>				· · · · · · · · · · · · · · · · · · ·		
1. Location of well:	Leavenworth	Fraction SE <sub>1/4</sub>	SW <sub>1/4</sub> SE <sub>1/4</sub>	Section	number 2	Township number	Range number	21
	tion from nearest town or city: 3 location if in city: 1 m11e Kansas	miles south	east & 3. Ow	ner of well r street: state, zip		Mrs. Eisenri 1115 Ottawa Leavenworth,	Kansas	66048
4. Locate with "X" in		sketch map:				6. Bore hole dia. 8 in. Well depth 80 ft.	. Completion da	<sub>10</sub> 7-23-79
NW	   NE					7 Cable tool X Rotary Hollow rod Jetted	Bored	Reverse rotary
₩	E					8. Use: X Domestic Pour Pour Pour Pour Pour Pour Pour Pour	ir conditioning _ il field water _	Stock Other
\$ S	X					9. Casing: Material PL   Threaded WeldedX  RMP PVCX	ISurface Weight	<u>- 18</u> in.
1 → 1 Mil				From	То	Dia. <u>5</u> in. to <u>65</u> ft. dep Dia. <u>in.</u> to <u>ft. dep</u>	th gage No	205
man Cad	1			0	1	10. Screen: Manufacturer's r <b>V1ny1</b> p	lex, ⊥n	tted Pig
Top Soi:	1		7. A	1	23	Type PVC Slot/gauze 06 1/1	Dia5 6Length	6 ft.
Clay				23	38	ft.c		44 ft.
Blue Mu				38	44	Gravel pack? X Size ra		/4-1/0 mo./day/yr.
Sand & S	and & Grave1			44	52	ft. below land sur		<u>-23-79</u>
Lime			· · · · · · · · · · · · · · · · · · ·	52	60	ft. after }	nrs. pumping	g.p.m.
Sha1e				60	70	Estimated maximum yield	12	g.p.m. mo./day/yr.
Lime				70	74	Yes XX No	Date	
	ne - Gray			74	80	XX Pitless adapter	18 Inches at	pove grade
Junas vo.				•		Xs. Well grouted? Yes With XX Neat 3ement Depth: From3 ft. to		Concrete
						16. Nearest source of possible ft. 400 Direction n Well disinfected upon comple	orth Type . tion? XX Ye	septic
						Pump: Manufacturer's name	<b>XX</b> Nat instal	led 🔊
						Model number Length of drop pipe Type:		
	(Use a second sh	set if needed				Submersible Jet Centrifugal	Re	rbine ciprocating
18. Elevation:	19. Remarks:			<b></b>		20. Water well contractor's c	ertification:	°
1080 Topography:	1/2.2					This well was drilled under my is true to the best of my know BREUER, INC	ledge and belief	
Hill Slope Upland						Business name Address Box. 147	Basehor	License No.
Valley			V.			Signer Authorize Copy	All the least of t	Day -7/19
orward the white, blue	and pink copies to the Department	of Health and I	Environment				Form	₩C-5\

BR elev = 1028 water = 1050

MI-1023

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WATER WELL RECORD



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

		- 5 N					
1. Location of well:	County Leavenworth	Fraction	SE SE	Section 2	number 2	Township number	Range number
	tion from nearest town or city: 3 location if in city: 1 mile Kansa	south	PAST. M	3. Owner of well R.R. or street: On City, State, zip o			Kansas 66048
4. Locate with "X" in	n section below:	Sketch map:					n. Completion date 7-23-79
	1 1 NE	. N. A	100			7 Cable tool X Rotar Hollow rod Jetted	Driven Dug Dored Reverse rotary
w	E					Irrigation /	Public supply Industry Air conditioning Stock Dil field water Other
white of the second						RMP PVC	Surface18 in
5. Type and color of r	le ————————————————————————————————————			From	То	Dia in. to ft. de	pth Wall Thickness: inches or pth gage No
						Vinyl	name (Slotted Pi)
Top Soi:				0	1	TypePVC	
C1ay				1	23	Set betweenft.	_ft. andft.
Blue Mu	d			23	38	Gravel pack?X_ Size r	ange of material $1/4-1/8$
Mud & S	and & Grave1			38	44	11. Static water level:30ft. below land so	rface Date <u>7-23-79</u>
Sand &	Grave1			44	52	12. Pumping level below lar	(
Lime				52	60	ft. after Estimated maximum yield	hrs. pumping g.p.m.
Sha1e				60	70	13. Water sample submitted:	mo./day/yr.
Lime				70	74	Yes XX No 14. Well head completion:	Date
Sandsto	ne - Gray			74	80	XX Pitless adapter  X5. Well grouted? Yes	18 Inches above grade
				0		With XX Neat cement	Bentonite Concrete
						16. Nearest source of possib	
						Well disinfected upon compl	etion? XX YesNo
						Well disinfected upon compl	etion? XX Yes No XXNot installed  HP Volts
						Well disinfected upon compl  Pump:  Manufacturer's name  Model number  Length of drop pipe  Type:	etion? XX Yes No XXNot installed  HP Volts
	(Use a second st	neet if needed)				Well disinfected upon compl  Pump:  Manufacturer's name  Model number  Length of drop pipe	### A Parameter   March   Marc
18. Elevation: . 1	(Use a second st	neet if needed)				Well disinfected upon complete Pomp:  Manufacturer's name Model number Length of drop pipe Type: Submersible Jet Centrifugal  20. Water well contractor's	etion? XX YesNo XXNot installed HP Volts ft. capacity g.p.m Turbine Reciprocating Other certification:
1080		neet if needed)				Well disinfected upon complete Pump:  Manufacturer's name	etion? XX Yes No  XXNot installed  HP Volts ft. capacity g.p.m.  Turbine Reciprocating Other  certification: ny jurisdiction and this report
1080		neet if needed)				Well disinfected upon complete Pomp:  Manufacturer's name	etion? XX Yes No  XXNot installed  HP Volts ft. capacity g.p.m.  Turbine Reciprocating Other  certification: you jurisdiction and this report wheldge and belief.  174  License No.
1080 Topography:		neet if needed)				Well disinfected upon complete Power Submersible Submersible Centrifugal  20. Water well contractor's This well was drilled under not strue to the best of my know BREVER, INC.	etion? XX YesNo  XXNot installed HP

BR elev 2/028

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