

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 SE 1/4** Section number **30** Township number **8** Range number **22** **Q/W**

2. Distance and direction from nearest town or city: **7 miles east of Easton, Kansas**

3. Owner of well: **Mr. R. R. Richardson**
R.R. or street: **Route 4, Box 50**
City, state, zip code: **Leavenworth, Kansas 66048**

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

6. Bore hole dia. **8** in. Completion date **7-15-77**
Well depth **120** ft.

7. 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. **5** in. to **121** ft. depth Wall Thickness: _____ inches or
Dia. _____ in. to _____ ft. depth Gage No. **265**

5. Type and color of material	From	To
Top Soil	0	3
Clay (wet)	3	14
Sand & Gravel	14	34
Shale	34	82
Lime	82	83
Shale	83	120

10. Screen: Manufacturer's name **(Slotted Pipe) Vinylplex, Inc.**
Type **.06 1/16** Dia. **5"**
Slot/gauze **PVC** Length **10' 14"**
Set between **20** ft. and **34** ft.
110 ft. and **120** ft.
Gravel pack? Size range of material **4 - 1/8**

11. Static water level: _____ mo./day/yr.
15 ft. below land surface Date **7-15-77**

12. Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield **10** g.p.m.

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

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

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

16. Nearest source of possible contamination:
ft. **200'** Direction **East** Type **septic**
Well disinfected upon completion? Yes No

17. Pump: _____ Not installed
Manufacturer's name **Jacuzzi**
Model number **4SLB** HP **3/4** Volts **220**
Length of drop pipe **115** ft. capacity **10** g.p.m.
Type:
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

18. Elevation: **870'**
Topography:
 Hill
 Slope
 Upland
 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.
BREUER, INC. **174**
Business name License No.
Address **Box 147, Basehor, Ks. 66007**
Signed **Ronald Breuer** Date **7-24-77**

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

BR 0600 = 836
water elev = 855

Form WWC-5

1-8 220 30 WE NE 1/4 1/4

CR