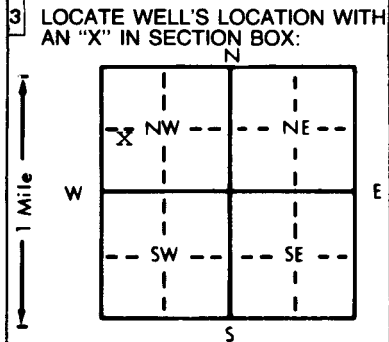


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1] LOCATION OF WATER WELL: County: LEAVENWORTH	Fraction NW ¼ SW ¼ NW ¼	Section Number 26	Township Number T 8 S	Range Number R 22 EW
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Distance and direction from nearest town or city street address of well if located within city? -
1100 METROPOLITAN AVENUE LEAVENWORTH, KS

2] WATER WELL OWNER: **SUZIE COLEMAN**
 RR#, St. Address, Box # : **7215 S.TOPEKA BLVD** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **TOPEKA, KS 66619** Application Number:



4] DEPTH OF COMPLETED WELL: **20** ft. ELEVATION:

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter **7 1/4** in. to **20** ft., and in. to ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		9 Dewatering
		10 Monitoring well
		12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes..... No.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No

5] TYPE OF CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued	Clamped
2 PVC <input checked="" type="checkbox"/>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded	
		7 Fiberglass		Threaded <input checked="" type="checkbox"/>	

Blank casing diameter in. to **10** ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface **0** in., weight **sched 40** lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot 0.10	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched 20	6 Wire wrapped	9 Drilled holes	
		7 Torch cut 10	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **20** ft. to **8** ft., From ft. to ft.

6] GROUT MATERIAL: **6** Neat cement **3** Cement grout **8** Bentonite **6** Other

Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage 15	

Direction from well? **east** How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	sod & topsoil			
1	5	BRN PLASTIC CLAY			
5	12	BRN TO TAN SILTY CLAY			
12	19	TAN MOIST CLAY			
19	20	WEATHERED TAN CLAY			

7] CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **(1)** constructed, **(2)** reconstructed, or **(3)** plugged under my jurisdiction and was completed on (mo/day/year) **1-27-98** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **575** This Water Well Record was completed on (mo/day/yr) **2-9-98** under the business name of **KURTZ ENVIRONMENTAL SERVICE** by (signature)

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.