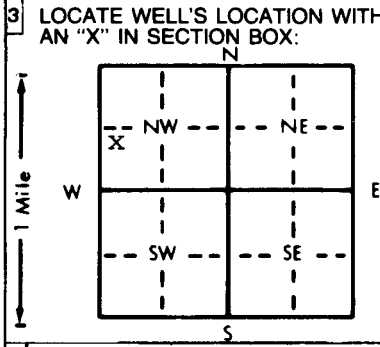


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: LEAVENWORTH	Fraction NW 1/4 SW 1/4 NW 1/4	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 & 1109 11th ST** MW#7

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
		X 10 Monitoring well

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 BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped
2 PVC X	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
		7 Fiberglass		X Threaded

Blank casing diameter in. to **10** ft., Dia **Sched 40** in. to ft., Dia in. to ft.

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

TYPE OF SCREEN OR PERFORATION MATERIAL:

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

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	X 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:

1 Neat cement	X 2 Cement grout	X 3 Bentonite	4 Other
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Grout Intervals: From **6** ft. to **0.03** ft., From **8** ft. to **6** 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
X Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? **west** How many feet? **40**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	6"	ASPHALT			
6"	1.5	ROCK BASE			
1.5	3	TOPSOIL			
3	8	BRN SILTY CLAY			
8	12	BRN TAN MOIST CLAY			
12	19	TAN SILTY CLAY			
19	20	TAN WEATHERED SHALE TO LIMESTONE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (**X**) 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) *[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.