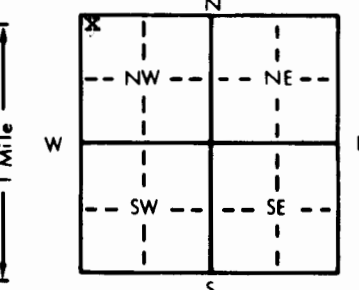


1 LOCATION OF WATER WELL: Fraction **NW 1/4 NW 1/4 NW 1/4** Section Number **6** Township Number **T 9 S** Range Number **R 22 EW**
 County: **Leavenworth**

Distance and direction from nearest town or city street address of well if located within city?
3 miles west of Leavenworth, Kansas

2 WATER WELL OWNER: **Robert DeMaranville**
 RR#, St. Address, Box #: **Route 4, Box 83** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Leavenworth, Kansas 66048** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:


4 DEPTH OF COMPLETED WELL: **100** ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. **21** ft. 2. ft. 3. ft.
 WELL'S STATIC WATER LEVEL **20** ft. below land surface measured on **mo/day/yr 5-7-84**
 Pump test data: Well water was ft. after hours pumping gpm
 Est. Yield **2** gpm: Well water was ft. after hours pumping gpm
 Bore Hole Diameter: **8 1/2** in. to **100** 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 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well
 Was a chemical/bacteriological sample submitted to Department? Yes.....No **xx**; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes **xx** No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass Threaded
 Blank casing diameter **5** in. to **100** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface **18** in., weight **.284** lbs./ft. Wall thickness or gauge No. **.265**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify)
 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 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From **20** ft. to **40** ft., From ft. to ft.
 From **80** ft. to **100** ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **15** ft. to **100** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grout Intervals: From ft. to **3** ft., From **15** 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
 Direction from well? **xx SE** How many feet? **150 ft.**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top xxx Soil			
3	12	Clay			
12	21	Sandy Clay			
21	23	Sand			
23	27	Lime			
27	35	Shale			
35	56	Lime			
56	78	Shale			
78	83	Lime			
83	98	Shale			
98	100	Lime			

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) **5-8-84** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **174A** This Water Well Record was completed on (mo/day/yr) **5-8-84** under the business name of **BREUER, INC.** by (signature) *Allen J. Breuer*

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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

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