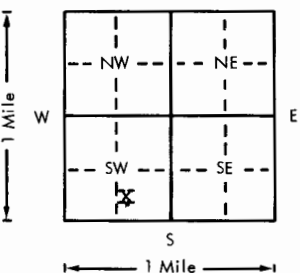


ck 24

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 SW 1/4 SE 1/4 SW 1/4	Section number 15	Township number T 9 S R	Range number 22 E/W
2. Distance and direction from nearest town or city: 1/2 mile south of Leavenworth, Ks.			3. Owner of well: Mr. John Gustafson R.R. or street: R. R. 3 Box 334AA City, state, zip code: Leavenworth, Kansas 66048		
4. Locate with "X" in section below: N  W E S 1 Mile			6. Bore hole dia. 8 in. Completion date 10-28-76 Well depth 80 ft.		
5. Type and color of material			7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
			8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material PL Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 258 lbs./ft. Dia. 0 in. to 81 ft. depth Wall Thickness: inches or Dia. 0 in. to 81 ft. depth gage No. 258		
			10. Screen: Manufacturer's name (Slotted Pipe) Vinylplex, Inc. Type PVC Dia. 06 1/16 Length 7 ft. Set between 0 ft. and 0 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 - 1/8		
			11. Static water level: 31 ft. below land surface Date 10-28-76 mo./day/yr.		
			12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 7 g.p.m.		
			13. Water sample submitted: ____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date ____		
			14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 18 inches above grade		
			15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 23 ft.		
			16. Nearest source of possible contamination: ft. 751 Direction no. Type septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
			(Use a second sheet if needed)		
18. Elevation: 915		19. Remarks:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		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 717 Basehor, Kansas Signed [Signature] Date 10-28-76			

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

Form WWC-5