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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

SE b6p

1. Location of well:		County <b>Leavenworth</b>	Fraction <del>SW</del> <sup>SE</sup> 1/4 <del>NE</del> <sup>b6p</sup> 1/4 NW 1/4	Section number <b>22</b>	Township number T <b>9</b> S R	Range number <b>22</b> (EW)
2. Distance and direction from nearest town or city: <b>1 3/4 miles west and 1/4 south of Lansing, Kansas</b>			3. Owner of well: <b>Mr. Ed McClure</b> R.R. or street: <b>Route 3 Box 334</b> City, state, zip code: <b>Leavenworth, Kansas 66048</b>			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <u>8</u> in. Completion date <u>2-24-76</u> Well depth <u>110</u> ft.	
					7. <input 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	
5. Type and color of material		From	To	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		
Top Soil - Dark		0	2	<input checked="" type="checkbox"/> Casing: Material <u>PL</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>111</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>258 WT</u>		
Clay - Yellow		2	28	<input checked="" type="checkbox"/> Screen: Manufacturer's name <u>Vinylplex, Inc.</u> Type <u>PVC</u> Dia. <input checked="" type="checkbox"/> <u>5"</u> Slot/gauze <u>.06 1/16</u> Length <input checked="" type="checkbox"/> <u>39"</u> Set between <u>71</u> ft. and <u>110</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>1/4 - 1/8</u>		
Sandy Shale - Blue		28	60	11. Static water level: _____ mo./day/yr. <u>50</u> ft. below land surface Date <u>2-24-76</u>		
Sandstone - Gray		60	105	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>8</u> g.p.m.		
Sandy Shale - Blue		105	110	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
<i>no iron</i>				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>18</u> inches above grade		
<i>no sulfur</i>				15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>23</u> ft.		
<i>soft water</i>				16. Nearest source of possible contamination: ft. <u>75</u> Direction <u>South</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name <u>Jacuzzi</u> Model number <u>554B</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe <u>100</u> ft. capacity <u>10</u> g.p.m. Type: <input checked="" 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)				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. <b>BREUER, INC. 174</b> Business name License No. Address <u>Box 147 Basehor, Kansas</u> Signed <u>Frank D. Breuer</u> Date <u>2-24-76</u> Authorized representative		
18. Elevation: <u>939</u>	19. Remarks:		20. Water well contractor's certification (continued):			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

9-220-22 SUMMER 1/4 1/4 1/4

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

Form WWC-5

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