

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 SE 1/4 SE 1/4 NW 1/4	Section number 34	Township number T 9 S R	Range number 22 E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:			
2. Distance and direction from nearest town or city: 3 miles north of Street address of well location if in city: Fairmount, Kansas			3. Owner of well: Mr. Pete Bijan R.R. or street: 2227 Richmond City, state, zip code: Kansas City, Kansas 66101			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date <u>8-22-77</u> Well depth <u>116</u> ft.		
4. Locate with "X" in section below: 		Sketch map: 		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		0	2	9. 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>118</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>265</u>		
Clay - Yellow		2	20	10. Screen: Manufacturer's name <u>(Slotted Pipe)</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>.06 1/16</u> Length <u>23'</u> Set between <u>42</u> ft. and <u>50</u> ft. <u>90</u> ft. and <u>105</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 - 1/8</u>		
Sandy Clay - Yellow		20	42	11. Static water level: _____ mo./day/yr. <u>42</u> ft. below land surface Date <u>8-22-77</u>		
Sand & Gravel with Clay		42	50	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>3 1/2</u> g.p.m.		
Brown Sandy Lime		50	52	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
Sandstone - Gray		52	87	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>18</u> inches above grade		
Sandy Shale - Blue		87	100	15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>15</u> ft.		
Sandstone - Gray		100	105	16. Nearest source of possible contamination: ft. <u>100'</u> Direction <u>NW</u> Type <u>septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Shale - Blue		105	116	17. Pump: _____ Not installed Manufacturer's name <u>Jacuzzi</u> Model number <u>5SLB</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe <u>111</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. BREUER, INC. Box <u>147</u> Business name _____ Licenses No. _____ Address <u>174 Baschaw, Ks 66007</u> Signed _____ Date <u>8-22-77</u> Authorized Representative		
18. Elevation:	19. Remarks:		20. Water well contractor's certification:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. BREUER, INC. Box <u>147</u> Business name _____ Licenses No. _____ Address <u>174 Baschaw, Ks 66007</u> Signed _____ Date <u>8-22-77</u> Authorized Representative			

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