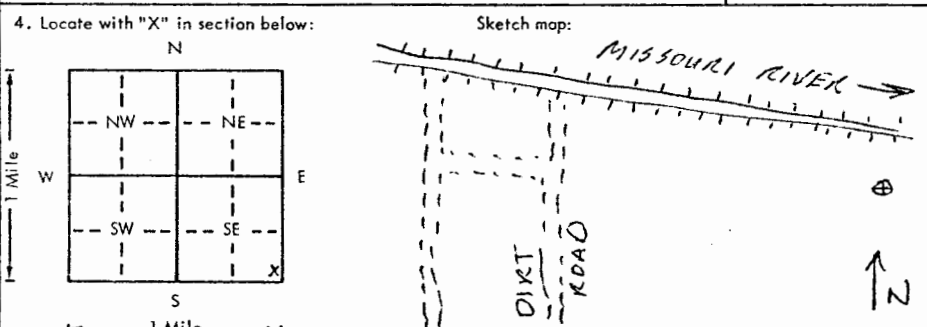


To BWS 1-27-78

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 <u>LEAVENWORTH</u> Fraction <u>NW SW SE 1/4 SE 1/4 SE 1/4</u> Section number <u>8</u> Township number <u>T 9 S R 23 E/W</u> Range number	
2. Distance and direction from nearest town or city: <u>2 MI S. E.</u> 3. Owner of well: <u>CITY OF LEAVENWORTH</u> Street address of well location if in city: R.R. or street: City, state, zip code: <u>LEAVENWORTH, KS</u>	
4. Locate with "X" in section below: 	
5. Type and color of material	
	From To
<u>TOP SOIL</u>	<u>0</u> <u>1</u>
<u>BROWN SILTY CLAY</u>	<u>1</u> <u>10</u>
<u>BROWN SILTY SAND</u>	<u>10</u> <u>19</u>
<u>GRAY MEDIUM TO FINE SAND</u>	<u>19</u> <u>30</u>
<u>GRAY FINE TO VERY FINE SAND</u>	<u>30</u> <u>42</u>
<u>GRAY MEDIUM TO COARSE SAND/TR. GRAVEL & Boulders</u>	<u>42</u> <u>50</u>
<u>GRAY MEDIUM TO FINE SAND</u>	<u>50</u> <u>63</u>
<u>GRAY MEDIUM TO COARSE SAND/TR. GRAVEL & Boulders</u>	<u>63</u> <u>69</u>
(Use a second sheet if needed)	
18. Elevation: <u>760</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	19. Remarks: <u>WELL # B</u>
6. Bore hole dia. <u>5 1/2</u> in. Completion date <u>8-23-77</u> Well depth <u>69</u> ft.	
7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary	
8. Use: <input type="checkbox"/> Domestic <input checked="" 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 <u>STEEL</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>16</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>136.2</u> lbs./ft. Dia. <u>2 1/2</u> in. to <u>49</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>500</u>	
10. Screen: Manufacturer's name <u>LAYNE</u> Type <u>SHUTTER</u> Dia. <u>2 1/2</u> " Slot/gauze <u>.105</u> " Length <u>20</u> ' Set between <u>49</u> ft. and <u>69</u> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material <u>.26</u> "	
11. Static water level: <u>9.3</u> ft. below land surface Date <u>9/9/77</u> mp./day/yr.	
12. Pumping level below land surfaces: <u>19.9</u> ft. after <u>4</u> hrs. pumping <u>1050</u> g.p.m. <u>20.1</u> ft. after <u>8</u> hrs. pumping <u>1050</u> g.p.m. Estimated maximum yield <u>2000</u> g.p.m.	
13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>10/10/77</u> mo./day/yr.	
14. Well head completion: <u>10'</u> Pitless adapter <u>10'</u> inches above grade	
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>0</u> ft. to <u>20</u> ft.	
16. Nearest source of possible contamination: <u>MISSOURI</u> ft. <u>300</u> Direction <u>NORTH</u> Type <u>RIVER</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>LAYNE & BOWLER</u> Model number <u>11" DHC</u> HP <u>60</u> Volts <u>960</u> Length of drop pipe <u>63</u> ft. capacity <u>200</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
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. <u>LAYNE-WESTERN CO. INC. 199</u> Business name License No. Address <u>1010 W. 39 K.C., Mo.</u> Signed <u>D. B. Arj</u> Date <u>1-23-78</u> Authorized representative	

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

Form WWC-5

BR 61-691