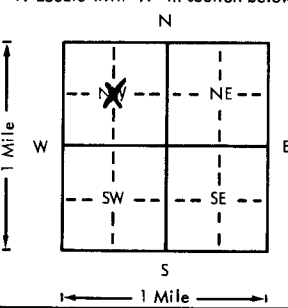


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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>Edwards</u> Fraction <u>1/4 C 1/4 NW 1/4</u> Section number <u>15</u> Township number <u>T 26 S R 17 E W</u> Range number	
2. Distance and direction from nearest town or city: <u>1 1/2 S of Helleburg, Ks.</u> Street address of well location if in city: <u>east side of rd.</u>	
3. Owner of well: <u>Walter Leichman</u> R.R. or street: <u>AFD</u> City, state, zip code: <u>Hudson, Ks. 67545</u>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
<u>Top soil</u>	<u>0 2</u>
<u>Sandy clay</u>	<u>2 17</u>
<u>Sand & gravel w/ clay mixed</u>	<u>17 24</u>
<u>Sand & gravel</u>	<u>24 43</u>
<u>Sand & gravel w/ clay mixed</u>	<u>43 45</u>
<u>Sand & gravel</u>	<u>45 84</u>
<u>Clay</u>	<u>84 98</u>
(Use a second sheet if needed)	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:
6. Bore hole dia. <u>2 1/2</u> in. Completion date <u>9-18-78</u> Well depth <u>88</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	
8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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: Above or below <u>18</u> in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u> </u> lbs./ft. Dia. <u>1 1/2</u> in. to <u>2 1/2</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>7</u>	
10. Screen: Manufacturer's name <u>Boyer</u> Type <u>steel</u> Dia. <u> </u> Slot/gauge <u>3/16</u> Length <u>28</u> Set between <u>60</u> ft. and <u>88</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 to 3/8</u>	
11. Static water level: <u>26</u> ft. below land surface Date <u>9-1-78</u> mo./day/yr.	
12. Pumping level below land surfaces: <u>42</u> ft. after <u>1</u> hrs. pumping <u>600</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>1400+</u> g.p.m.	
13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>9-1-78</u> mo./day/yr.	
14. Well head completion: <input type="checkbox"/> Pitless adapter <u> </u> inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
16. Nearest source of possible contamination: <u>1400</u> ft. Direction <u>South</u> Type <u>Tringwell</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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	
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>Rosenkrantz-Bemis</u> <u>134</u> Business name License No. Address <u>West Bend, Ks. 67530</u> Signed <u>Sandy Kulas</u> Date <u>10-7-78</u> Authorized representative	

T 26 S R 17 E W 1/4 C 1/4 NW 1/4

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

Form WWC-5