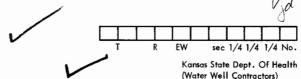
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD KSA 82a-1201-1215



Kansas State Dept. Of Health (Water Well Contractors) Forbes-Bldg. 740

								To	opeka, Kansas 66620	
1 Location of well:	County	Township name	Fraction		1	n number		Town number	Range number	
Location of well:	Shamnee		SWSEN	V.F	/	0		T115	K15E	
Distance and directi	"X" in section below:  Sketch map:  4 Well depth: 57 ft. Date of completion 7/14/7!  Well diameter 10 in.  5 Cable tool Rotary Driven Dug Hollow rod Jetted Bored Reverse rotary  6 Use: Domestic Public supply Industry									
Street address of well location if in city:						Address: 4150 N.W. 35 St. Topeka				
•								4 Well depth: 570 ft. Date of completion 7/4/79 Well diameter in.		
w <b>X</b> E							6 Use: X Domestic Public supply Industry Irrigation Air conditioning Commercial Test well			
							7 Casing: Material Statilight: Spove/below Threaded Welded Wisurface 1. in. Diam. 6 5 6			
						_	Diam. 6 5/8   Weight 13   lbs./ft in. to ft. depth   Drive shoe?   Yes \ \overline{\overline{\text{W}}} \ \text{No} \ in. to ft. depth			
	Тур	e and color of material			From	То	8 5014	en.	Metal	
To	p Soil				0	1	Тур	e <u>Steel</u> D	ia. <u>6 5/8</u>	
Br	own Clay Wi	th Sand			1	10	Slot Set	t/gauze ## holes between _54 ft. and	89th.—42 482ft.——	
Br	own Clay Wi	th Coarse	Sand		10	19			Size range of material	
Quick Sand				19	47	9 Stat	ic water level: 35 ft. below land surface	Date 7 <u>/3</u> /75		
Gr	avel And Qu	ick Sand	Sand  1 10  Sand							
3	Large Grave	1			52	57		ft. after hrs.	pumping g.p.m.	
							11 Wat	ter sample submitted:		
									·	
							X	Pitless adapter	_	
							<b>S</b>	Neat cement Bentoni	—	
						ft.	14 Nearest source of possible contamination: ft. 120 Direction South Typ Well disinfected upon completion?  yes			
							15 Pum	np:	tion? X Yes No	
							Mo	nufacturer's name 7EH + del number 7EH + gth of drop pipe 49 fi	uld IP 1/3 Volts 23( t. capacity 7 g.m.p.	
							Тур	e:	Turbine	
	(use	a second sheet if needed	)					Jet [ Certrifugal	Reciprocating Other	
16 Remarks: elever	16 Remarks: elevation Slab Will Be Installed By Customer							er well contractor's certifications		
Topography: Q U							1	ort is true to the best of my		
Hill Slope						Busi Ada	ness name)	Doples No.		
Upland Valley	Slopes to t	he South					Sign	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ntative Gate 7/16/7	

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

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