

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 Shawnee	Fraction NE 1/4 NW 1/4 NW 1/4	Section number 28	Township number T 11 S R	Range number 16 EW
2. Distance and direction from nearest town or city: in Topeka			3. Owner of well: Oakland Sewage Treatment Plant		
Street address of well location if in city: Poplar & Sardon Ave. in Topeka			R.R. or street: City of Topeka City, state, zip code: Topeka, Kansas		
4. Locate with "X" in section below: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> </div> <div> <p>Sketch map</p> </div> </div>			6. Bore hole dia. <u>12</u> in. Completion date <u>9/24/80</u> Well depth <u>30</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 type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other		
			9. Casing: Material <u>PVC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>Sch 40</u> lbs./ft. Dia. <u>4</u> in. to <u>21</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>Sch 40</u>		
5. Type and color of material			From	To	
Topsoil			0	1	
Brown silty sandy clay			1	15	
Brown fine sand			15	20	
Brown fine to med. sand			20	25	
Brown med. to coarse sand			25	30	
Total Depth			30		
				10. Screen: Manufacturer's name <u>Houston</u> <u>Well Screen</u>	
				Type <u>wire wound</u> Dia. <u>4"</u>	
				Slot/gauze <u>#10</u> Length <u>10'</u>	
				Set between <u>21</u> ft. and <u>31</u> ft. ft. and ft.	
				Gravel pack? <u>yes</u> Size range of material <u>3-4</u>	
				11. Static water level: mo./day/yr. <u>26</u> ft. below land surface Date <u>9/24/80</u>	
				12. Pumping level below land surface <u>not a pumping</u> ft. after hrs. pumping well g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m.	
				13. Water sample submitted: mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade	
				15. Well grouted? <u>yes</u> 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: ft. <u>300</u> Direction <u>East</u> Type <u>Sewage</u> Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Model number HP Volts Length of drop pipe ft. capacity 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	
			(Use a second sheet if needed)		
18. Elevation: <u>875+</u> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Remarks: This is a monitoring well. Water samples will be collected and submitted at a later date.			
		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.</u> <u>149</u> Business name License No. Address <u>1010 W. 39th, K.C., Mo.</u> Signed <u>Sam L. Higgins</u> Date <u>10/6/80</u> Authorized representative			

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