

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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

*not entered*

1 Location of well:	County <b>WYANDOTTE</b>	Township name	Fraction <b>S.E. 1/4 S.W. 1/4</b>	Section number <b>30</b>	Town number <b>11 S.</b>	Range number <b>24 E.</b>																																			
Distance and direction from nearest town or city: <b>IN K.C. KS.</b>			3 Owner of well: <b>TEXTILANA - HENKEL</b>																																						
Street address of well location if in city: <b>2140 SOUTH 88 ST.</b>			Address: <b>2140 SOUTH 88 STREET KANSAS CITY, KANSAS</b>																																						
Locate with "X" in section below:		Sketch map:		4 Well depth: <b>65</b> ft. Date of completion <b>4-17-77</b> Well diameter <b>12</b> in.																																					
N W ——— E S 1 Mile		<b>SEE ATTACHED MAP</b>		5 <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																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:5%;">2</th> <th style="width:65%;">No. 1-77</th> <th style="width:15%;">Type and color of material</th> <th style="width:5%;">From</th> <th style="width:5%;">To</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td><b>BROWN SILTY CLAY</b></td> <td><b>0</b></td> <td><b>2.0'</b></td> </tr> <tr> <td></td> <td></td> <td><b>BROWN SILTY SAND</b></td> <td><b>2.0'</b></td> <td><b>16.0'</b></td> </tr> <tr> <td></td> <td></td> <td><b>BROWN MEDIUM TO FINE SAND</b></td> <td><b>16.0'</b></td> <td><b>23.0'</b></td> </tr> <tr> <td></td> <td></td> <td><b>GRAY MEDIUM TO FINE SAND</b></td> <td><b>23.0'</b></td> <td><b>30.0'</b></td> </tr> <tr> <td></td> <td></td> <td><b>GRAY MEDIUM TO FINE SAND, TR. GRAVEL</b></td> <td><b>30.0'</b></td> <td><b>39.0'</b></td> </tr> <tr> <td></td> <td></td> <td><b>GRAY COARSE TO MEDIUM SAND</b></td> <td><b>39.0'</b></td> <td><b>51.0'</b></td> </tr> </tbody> </table>		2	No. 1-77	Type and color of material	From	To			<b>BROWN SILTY CLAY</b>	<b>0</b>	<b>2.0'</b>			<b>BROWN SILTY SAND</b>	<b>2.0'</b>	<b>16.0'</b>			<b>BROWN MEDIUM TO FINE SAND</b>	<b>16.0'</b>	<b>23.0'</b>			<b>GRAY MEDIUM TO FINE SAND</b>	<b>23.0'</b>	<b>30.0'</b>			<b>GRAY MEDIUM TO FINE SAND, TR. GRAVEL</b>	<b>30.0'</b>	<b>39.0'</b>			<b>GRAY COARSE TO MEDIUM SAND</b>	<b>39.0'</b>	<b>51.0'</b>	6 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"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> <b>MONITORING WELL</b>		7 Casing: Material <b>PVC</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>24</b> in. Diam. Weight <b>5440</b> lbs./ft. <b>6</b> in. to <b>65</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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		8 Screen: <b>SLOTTED PVC</b> Manufacturer <b>SLOTTED</b> Dia. <b>6"</b> Type <b>SLOTTED</b> Length <b>50'</b> Slot/gauze _____ Length _____ Set between <b>15</b> ft. and <b>50</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/2 x 1/4</b>																																							
		9 Static water level: _____ ft. below land surface Date _____																																							
		10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.																																							
		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																																							
		12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade																																							
		13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <b>0</b> ft. to <b>10</b> ft.																																							
		14 Nearest source of possible contamination: <b>NONE</b> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																							
		15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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																																							
16 Remarks: elevation <b>APPROX. 770</b>		17 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. <b>LAYNE-WESTERN Co.</b> <b>149</b> Business name _____ License No. _____ Address <b>1010 W. 39th - K.C. Mo.</b> Signed <b>Daniel B. Higgins</b> Date <b>6-13-77</b> Authorized representative																																							

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

Form WWC-5

BR < 719



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