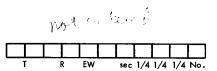
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD KSA 82a-1201-1215



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

	County	Township name	Fraction S	X	Section	on number		Town number	Range number	
1 Location of well:	WYANDOTE.	DELEWARE	\$ SW/c	SE		10		115	25E	
Distance and direction from nearest town or city: KANSAS CITY, KANSAS 3 Owner of well: CORP OF ENGINEERS										
Street address of well location if in city: WELL NO.2 SYSTEM III  Address: KANSAS CITY, MISSOURI  BROECENTRAL										
Locate with "X" in section below: Sketch map:							4 Well depth: 74 ft. Date of completion 12-3			
#K							Well diameter → 30 in.  5 ☐ Cable tool ☐ Rotary ☐ Driven ☐ Dug			
\$   \$   KAN						INSAS		Hollow rod Jetted Bored Reverse rotary		
w						R	6 Use: Domestic Public supply Industry			
WE KANSAS RIVER							☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well			
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\							7 Casing: Material <b>FRGLS</b> Height: <del>above/</del> below			
<u> </u>							Threaded Welded Surfacein.  Diam. Weight lbs./ft			
Mile-								<b>2</b> in. to <b>74</b> ft. depth D	rive shoe? Yes No	
2	Туре	and color of material			From	То	8 Sc	in. toft. depth		
SILTY CLAY WITH CINDERS & BRICKS					0	10	Mo	anufacturer <i>FIBERGL</i>		
FINE SAND (BROWN)								pe <u>310 77 50</u> Di ot/gauze <u>//6</u> Le		
	FINE	SAND (	BROW	<b>N)</b>	10	18		t betweenft. and _ ttings:	13_ft	
n	DEDIUM	SAND	(GRAY	)	18_	41		ravel pack 🔀 Yes 🗌 No S	ize range of materiol 1/2	
FINE	3ANDY	SILT (	(SRAY)	)	41	58	9 Sto	atic water level: ft. below land surface	Date <u>8-26</u> -75	
$C_0$	ARSE SAI	NP (	GRAY	)	58	74	10 Pu	mping level below land surfe	oces:	
								ft. after <u>4</u> hrs. <u> </u>		
-							Est	imated maximum yield 12		
								ater sample submitted: Yes ~ 🔀 No Date		
								ell head completion: No	<del>-</del>	
									Inches above grade  No	
-								Neat cement Bentonity	S CONCRETE	
								earest source of possible con		
								Direction	Type ion? □ Yes	
									Not installed	
				-				anufacturer's name Hi	P Volts	
	<u> </u>						Ler	ngth of drop pipe ft		
								pe: ] Submersible	] Turbine	
	lura	a cocond shoot if needed)						Jet [	Reciprocating Other	
(use a second sheet if needed)  16 Remarks: elevation 75/								iter well contractor's certific		
	,							is well was drilled under my	•	
Тородгарну:							•	ort is true to the best of my AYNE-WESTER		
□ Hill							Bus	iness name Idress 1010 M 3	9+4 ST	
☐ Slope☐ Upland								gned Albandi	2 Date 6/1/7/	
Uplana ▼ Valley							ριg	Authorized represen	tative	

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

Form WWC-5