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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 WYANDOTTE	Fraction SW 1/4 SE 1/4 SE 1/4	Section number 17	Township number T 11 S	Range number R 25 E E/W
2. Distance and direction from nearest town or city: Street address of well location if in city: K.C.K. 18th & KANSAS AVE.			3. Owner of well: PROCTER & GAMBLE MFG. CO. R.R. or street: 18th & KANSAS AVE. City, state, zip code: KANSAS CITY, KS.			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 12 in. Completion date 2-3-77 Well depth _____ 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		
5. Type and color of material		From	To	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" 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 type="checkbox"/> Other		
GRAVEL FILL		0'0"	4'0"	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface 12 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 5.4 lbs./ft. Dia. 6 in. to 35 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 432		
BROWN VERY SILTY CLAY		4'0"	9'0"	10. Screen: Manufacturer's name _____ Type SLOTTED PVC Dia. 6" Slot/gauze _____ Length 24' Set between 35 ft. and 59 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material #3 & #4		
BROWN CLAYEY SILT		9'0"	12'0"	11. Static water level: _____ mo./day/yr. 40 ft. below land surface Date 2-3-77		
BROWN MED TO FINE SAND		12'0"	18'0"	12. Pumping level below land surfaces: N.A. _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
BROWN CLAYEY SILT WITH FINE SAND		18'0"	39'0"	13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
BROWN MED. TO COARSE SAND W/ FINE SAND		39'0"	60'0"	14. Well head completion: N.A. <input type="checkbox"/> Pitless adapter _____ Inches above grade		
TOTAL DEPTH		60'0"		15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete Depth: From 0 ft. to 15 ft.		
(Use a second sheet if needed)				16. Nearest source of possible contamination: ft. 340 Direction N Type CHEMICAL Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No		
				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		
18. Elevation: 764 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	19. Remarks: WELL NO. 3-77 USED AS A WATER TABLE MONITORING WELL.			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. LAYNE WESTERN 102 Business name _____ License No. _____ Address 1010 W. 39th K.C., MO. Signed WBR Date 3-21-79 Authorized representative		

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

Form WWC-5