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

| 1 Location of well: | County | Township name | Fraction | Section number | Town number | Range number |
|---|---|---|---|---|---|---|
| | WYANDOTTE | DELEWARE | NE NE NE | 22 | 11 S | 25 E |

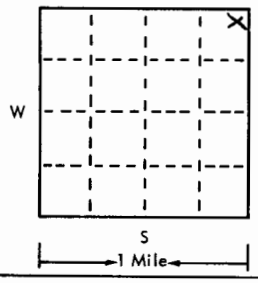
Distance and direction from nearest town or city: KANSAS CITY, KANSAS

Street address of well location if in city: #14 SYSTEM I SHAWNEE & RR

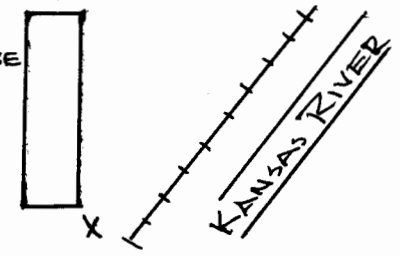
3 Owner of well: CORP OF ENGINEERS

Address: KANSAS CITY, MISSOURI

Locate with "X" in section below:




Sketch map:




4 Well depth: 85 ft. Date of completion
Well diameter ____ in. 3-13-1975

5 ☐ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☑ Reverse rotary

6 Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☑ RELIEF

7 Casing: Material ~~Fiber~~ Height: ~~above~~/below
Threaded ☐ Welded ☐ Surface -10 in FT
Diam. Weight ____ lbs./ft.
12 in. to 79 ft. depth Drive shoe? ☐ Yes ☑ No
____ in. to ____ ft. depth

| 2 Type and color of material | From | To |
|---|---|---|
| SILT | 0 | 12 |
| MANURE | 12 | 23 |
| SANDY SILT GRAY | 23 | 34 |
| MEDIUM SAND GRAY | 34 | 65 |
| COARSE SAND GRAY | 65 | 85 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| (use a second sheet if needed) | | |

8 Screen:
Manufacturer FIBERGLASS RESOURCES
Type SLOTTED Dia. 12"
Slot/gauze 1/16" Length 30
Set between 79 ft. and 33 ft.
Fittings:
Gravel pack ☑ Yes ☐ No Size range of material -½

9 Static water level:
26 ft. below land surface Date 9/8/75

10 Pumping level below land surfaces:
31 ft. after 4 hrs. pumping 700 g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield 600 g.p.m.

11 Water sample submitted:
☐ Yes ☑ No Date ____

12 Well head completion: NONE
☐ Pitless adapter ☐ Inches above grade

13 Well grouted? ☑ Yes ☐ No
☐ Neat cement ☐ Bentonite ☐ CONCRETE
Depth: From 31 ft. to 18 ft.

14 Nearest source of possible contamination:
ft. ____ Direction ____ Type ____
Well disinfected upon completion? ☐ Yes ☒ No

15 Pump: No ☐ Not installed
Manufacturer's name ____
Model number ____ HP ____ Volts ____
Length of drop pipe ____ ft. capacity ____ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Centrifugal ☐ Other

16 Remarks: elevation 753

Topography:
☐ Hill
☐ Slope
☐ Upland
☑ Valley

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.
LAYNE-WESTERN CO 149
Business name License No.
Address 1010 W. 39TH ST.
Signed C. Alexander Date 6/11/75
Authorized representative

11 25E 22 NE NE NE

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

Form WWC-5

677-H