

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

WATER WELL RECORD
KSA 82a-1201-1215

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

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

1 Location of well:	County WYANDOTTE	Township name DELEWARE	Fraction NW NW	Section number 23	Town number 11 S	Range number 25 E			
Distance and direction from nearest town or city: K.C., KANSAS #17 SYSTEM SHAWNEE & R.R.				3 Owner of well: CORP OF ENGINEERS Address: KANSAS CITY, MISSOURI					
Locate with "X" in section below: <div style="display: flex; align-items: center;"> <div style="text-align: center; margin-right: 10px;"> <p>N</p> <p>W</p> <p>S</p> <p>1 Mile</p> </div> <div> <p>G & K WAREHOUSE</p> </div> </div>				4 Well depth: <u>91</u> ft. Date of completion <u>10/11/74</u> Well diameter <u>30</u> in. 5 <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary 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"/> RELIEF 7 Casing: Material <u>FRGLS</u> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>10</u> in. Ft. Diam. <u>12</u> in. to <u>89</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No — in. to — ft. depth 8 Screen: Manufacturer <u>FIBERGLASS RESOURCES</u> Type <u>SLOTTER</u> Dia. <u>40</u> Slot/gauze <u>1/16</u> Length <u>40</u> Set between <u>89</u> ft. and <u>37</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>-1/2</u> 9 Static water level: <u>27</u> ft. below land surface Date <u>9/14/75</u> 10 Pumping level below land surfaces: <u>32</u> ft. after <u>4</u> hrs. pumping <u>850</u> g.p.m. — ft. after — hrs. pumping — g.p.m. Estimated maximum yield <u>100</u> g.p.m. 11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date — 12 Well head completion: <u>No</u> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade 13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> <u>CONCRETE</u> Depth: From <u>27</u> ft. to <u>11</u> ft. 14 Nearest source of possible contamination: ft. — Direction — Type — Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 15 Pump: <u>NONE</u> <input 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 16 Remarks: elevation <u>754</u> <div style="margin-top: 10px;"> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley </div>			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. <u>LAYNE-WESTERN CO. 149</u> Business name License No. Address <u>1010 W. 38TH ST.</u> Signed <u>C. Allen</u> Date <u>6/11/76</u> Authorized representative		

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

Form WWC-5