

DATE _____
 BY _____
 SURVEYED _____
 PLOTTED _____
 NOTE BOOK _____
 AREAS CHECKED _____
 NO. _____

DATE _____
 BY _____
 ORIGINAL SURVEY _____
 PLOTTED _____
 NOTE BOOK _____
 AREAS CHECKED _____
 NO. _____

NOTE: LOCATION OF UTILITIES IS APPROXIMATE, DEPTH AND OFFSET TO BE VERIFIED IN THE FIELD.

PROPOSED RIPRAP, CLASS A4

PROPOSED AGGREGATE SHOULDERS TYPE B

6" HIGH PRESSURE GAS LINE

C=30.2
 F=8.8

FIBER OPTIC CABLES

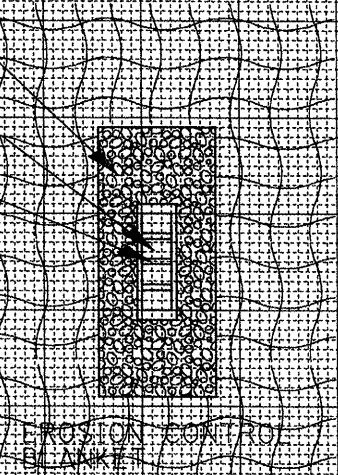
STA. 122+31

165
 160
 155

RIPRAP A3 (4" ALL SIDES)

3'X5' DROP BOX GALVANIZED STEEL PIPE

STA. 121+81



165
 160
 155
 150

PROPOSED BOX CULVERT END SECTION
 CULVERT NO. 1
 ELEVATION = 153.42

PROPOSED RIPRAP, CLASS A4

PROPOSED AGGREGATE SHOULDERS TYPE B

PROPOSED RIPRAP, CLASS A3

PROPOSED 3'X5' DROP BOX NO. 1
 ELEVATION = 154.25
 TOP OF BOX = 159.25

STA. 121+81

6" HIGH PRESSURE GAS LINE

C=0
 F=54.4

FIBER OPTIC CABLES

PROPOSED PRECAST BOX CULVERT 3'X3'

60 50 40 30 20 10 10 20 30 40 50 60

