

WATER WELL RECORD

Form WWC-5

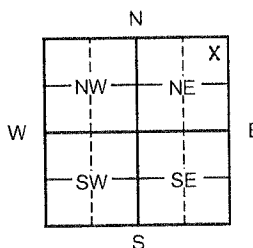
Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Jefferson	Fraction NE ¼ NE ¼ NE ¼	Section Number 5	Township Number T 10 S	Range Number R 19 E
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Distance and direction from nearest town or city street address of well if located within city? **516 Walnut St., Oskaloosa KS**

2 WATER WELL OWNER: KDHE

RR#, St. Address, Box # : **1000 SW Jackson**
City, State, ZIP Code : **Topeka KS**

Global Positioning System (decimal degrees, min. of 4 digits)Latitude: **N 39.21554°**Longitude: **W 95.31105°**Elevation: **RIM: 1112.25; TOC: 1111.80**Datum: **NAVD 27**Data Collection Method: **legal survey**
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:
**4 DEPTH OF COMPLETED WELL 30.25 ft.****MWIR**

Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.

WELL'S STATIC WATER LEVEL **26.35** ft. below land surface measured on mo/day/yr **7/2/14**

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn & garden) **10 Monitoring well**Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X**; If yes, mo/day/yrSample was submitted _____ Water Well Disinfected? Yes _____ No **X****5 TYPE OF CASING USED:**

5 Wrought Iron

8 Concrete tile

CASING JOINTS: Glued _____ Clamped _____

1 Steel

3 RMP (SR)

6 Asbestos-Cement

9 Other (specify below) _____

Welded _____

2 PVC

4 ABS

7 Fiberglass

Threaded **X**Blank casing diameter **2** in. to **10.25** ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.Casing height below land surface **0.45** ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____**TYPE OF SCREEN OR PERFORATION MATERIAL:**

1 Steel

3 Stainless steel

5 Fiberglass

7 PVC

9 ABS

11 Other (specify) _____

2 Brass

4 Galvanized steel

6 Concrete tile

8 RM (SR)

10 Asbestos-Cement

12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot

3 Mill slot

5 Gauze wrapped

7 Torch cut

9 Drilled holes

11 None (open hole)

2 Louvered shutter

4 Key punched

6 Wire wrapped

8 Saw Cut

10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From **10.25** ft. to **30.25** ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **7** ft. to **30.75** ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** **4 Other Concrete: 0-1'**Grout Intervals From **1** ft. to **7** ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank

4 Lateral lines

7 Pit privy

10 Livestock pens

13 Insecticide Storage

16 Other (specify below)

2 Sewer lines

5 Cess pool

8 Sewage lagoon

11 Fuel storage

14 Abandoned water well

3 Watertight sewer lines

6 Seepage pit

9 Feedyard

12 Fertilizer storage

15 Oil well/ gas well

Direction from well? **Within Basin**How many feet? **Within Basin**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Gravel & fill			
1	5	Green-brown iron stained clay			
5	10	Green-brown iron stained clay mottling			
10	15	Light brown clay			
15	20	Brown mottled clay			
20	26	Brown mottled clay w/ little silt			
26	30.75	Dark brown mottled clay w/ little silt			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **(1) constructed**, **(2) reconstructed**, or **(3) plugged** under my jurisdiction and was completed on (mo/day/year) **6/25/14** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **757**. This Water Well Record was completed on (mo/day/year) **7/9/14** under the business name of **Larsen & Associates, Inc.** by (signature) _____

INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell>.

Jefferson

15 - 10 - 14e

DENNIS L HANDKE

1820 NW 59th Terrace
TOPEKA, KANSAS 66618
785-286-4047 Home
785-286-1990 Fax

HGS Copy

Jessica Chapman
Larsen & Associates
1311 E. 25th Street, Suite B
Lawrence, Kansas, 66046

July 1, 2014

RE: Monitor Well Elevation Survey
Jefferson & Hwy 59, Oskaloosa, Kansas

Proj. 14-00BB
Blondie's 66
U4-044-01215

Bench Mark: Chised square on SW corner of concrete storm inlet at SE corner of property.
Elev: 1114.35 North 5129 East 22 (from SW Cor. Sec. 5-10-19E)

MW-1R	rim	1112.25	North	5175	NE1/4,NE1/4,NE1/4,NE1/4
	top pipe	1111.80	West	78	Lat= 39.21554 Long = 95.31105
MW-4R	rim	1108.62	North	5258	NE1/4,NE1/4,NE1/4,NE1/4
	top pipe	1108.21	West	35	Lat= 39.21577 Long = 94.31090
MW-7	rim	1112.64	North	5252	NE1/4,NE1/4,NE1/4,NE1/4
	top pipe	1112.23	West	107	Lat= 39.21576 Long = 94.31116
MW-8	rim	1110.01	North	5167	NW1/4,NW1/4,NW1/4,NW1/4 (Sec. 4-10-19)
	top pipe	1109.62	East	68	Lat= 39.21552 Long = 94.31054

Lat & Long derived Oskaloosa 7.5' quad map. NAVD 27

Elevation established from existing project.

If you have any questions, please feel free to call me. Thank you for the opportunity to be of service to you.

Dennis L Handke RLS

Dennis L Handke
KANSAS
LAND SURVEYOR