CORRECTION(S) TO WATER WELL RECORD (WWC-5)

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

W	ATE	R WELL	RECORD	For	m WWC-	5 1	ivision of	Water Res	sources; App. N	o		
1	LOCA	TION OF	WATER WELL:	Fraction			Section	Number	Township]	Number	Range	Number
Cou	ity:	and direction	Douglas	SE ¼	SW ¼	SW ½	Clobal I	28 Positionir	T 10	S cimal dem	R Z	of 4 digital
County: Douglas SE ¼ SW ¼ SW ½ 28 T 10 S R 24 E Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits located within city? Latitude: NA												
7340 Leavenworth Rd., Kansas City, KS 2 WATER WELL OWNER: Washington High School, USD 500 Longitude: NA Elevation: TOC: 1024.37; RIM: 1024.74												
2 WATER WELL OWNER: Washington High School, USD 500 RR#, St. Address, Box # : 313 N 10th St.							Elevation: TOC: 1024.37; RIM: 1024.74 Datum: NAVD88					
	RR#, 9	St. Address	Box # : 313 N	10th St.	(6100 6000		Datum Data C	: NA	VD88	1 annuar		
City, State, ZIP Code : Kansas City, KS 66102-5239 Data Collection Method: legal survey 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 21.80 ft.												
		TON	LS 4 DEI III O.	r COMIT L	EIED WEI	ZI.0	MW		11.			
			N Depth(s) Grou	ndwater En	countered 1					ft. 3		ft.
		ION BOX	WELL'S STA	TIC WATE	ER LEVEL	15.66	ft. below	land sur	face measured	on mo/d	lay/yr	8/4/10
	SECTION BOX: WELL'S STATIC WATER LEVEL 15.66 ft. below land surface measured on mo/day/yr Pump test data: Well water was ft. after hours pumping											
Est. Yield gpm: Well water was ft. after hours pur										ırs pumpi	ing	gpm
NW—NE— WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection									ijection v	well		
۱۸/	W E 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify bel 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well										ify below)	
**												
	-swse											
	Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs											
S Sample was submitted Water Well Disinfected? Yes No X 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped												
5	ГҮРЕ	OF CASI	NG USED: 5	Wrought I	ron	8 Conc	rete tile	CAS	SING JOINTS	3: Glued	Cla	mped
	1 Ste	el	3 RMP (SR) 6	Asbestos-	Cement	9 Othe	r (specify	below)		Welde	:d	
(2)PV	C	4 ABS 7	Fiberglass						Thread	ded	X
Bla	nk cas	ing diamete	er 2 in. to	12	ft., Dia		_ in. to	ft	, Dia	in.	to	ft.
Cas	ing hei	ght below l	and surface 0.3	7 ft., V	Veight		I!	bs./ft. Wa	all thickness o	r gauge l	No	
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 12 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.37 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 12 ft. to 22 ft. From ft. to ft. From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 10 ft. to 22 ft. From ft. to ft. From ft. to ft. From ft. to ft.												
2 Louvered shutter *Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)												
SCI	CEEN-	PEKFOKA	TED INTERVALS	. From	14	H. 10	44	H. F	10III 	IL. U	٠ 	
	CP	AVEL DA	OV INITEDWALE.	From -	10	ft. to	22	A E	rom	H t	0 	IL,
	GK	AVELIA	CK INTERVALS.	From	10	ft to		н н Н Б	rom	ft t	o 	
	~= ~-		N	110111		11.10		(1)0:1	10III		·	
6	GROU	JT MATE	RIAL: 1 Neat cer	nent 2 Ce	ement grout	(3) Bei	itonite	4)Othe	r Concrete:	J-1 teet		
Gro	ut Inte	rvais r	rom 1 ft. to	Π UL	From		τ. το	II	From		. II. 10	π.
		e nearest so tic tank	d Lateral li				tock pens	s 13 Inc	secticide Stora	age	16 Othe	er (specify
		er lines	5 Cess poo		age lagoon (oandoned water		belo	
			er lines 6 Seepage						l well/ gas we		0010	•••)
		from well?		L			ny feet?					
FR	OM	TO	LITHO	LOGIC LO	G	FRO	M TO)	PLUGGI	NG INTI	RVALS	3
	0	0.3	Asphalt	<u> </u>		1.110	1 2 3	_			31117120	
).3	10	Brown silty clay									
	10	15	Gray silty clay with ire	n nodules					· · · · · · · · · · · · · · · · · · ·			
	15	22	Brown silty clay									
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				TT 1.4 N. 10								
				V-0.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4				Flushn	ount waiver fro	m BOW		- 4
TO COMPANY OF THE PROPERTY OF												
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (constructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8/3/10 and this record is true to the best of my knowledge and belief												
under my jurisdiction and was completed on (mo/day/year) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 12/15/10												
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. Seat one to WATER WELL OWNER and retain one for												
Geole	gy Sect	ion, 1000 SW	Jackson St., Suite 420,	Topeka, Kansa	is 66612-1367.	Telephon	785-296-5	522. Sen	one to WATER V	VELL OW	NER and re	etain one for
your	ecoras.	ree of \$5.00	for each constructed we	ı. visit us at l	nup://www.kdl	icks.gov/w	aicfwell.	<u> </u>				