WATEI	R WELL	RECORD	Forn	n WWC-5	ivision of Water Resources; App. No.						
	TION OF	WATER WELL: Rilev		SW ¼	SE ¼	Section No	umber	Townsh	nip Number	Range Number	
County: Riley SW ½ SW ½ SE ½ 11 T 10 S R 7 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: N 39.18981°											
3104 Anderson, Manhattan, KS  2 WATER WELL OWNER: Shop Quik Stores, LLC  Longitude: W 96.61517° Elevation: Rim: 1059.63 TOC: 1059.54											
2 WATER WELL OWNER: Shop Quik Stores, LLC							Elevation: Rim: 1059.63 TOC: 1059.54				
RR#, St. Address, Box # : PO Box 548						Datum: above mean sea level					
RR#, St. Address, Box # : PO Box 548 City, State, ZIP Code : Manhattan, KS 66502-0548 Datum: above mean sea level Data Collection Method: legal survey											
5 LOCATE WELL 5 4 DEI III OF COM LETED WELL 25											
1		N Danth (a) Consum	devetes Dec			MW4	A 2		Δ 2		
ı	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. SECTION BOX: Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. below land surface measured on mo/day/yr 6/25/08										
SECT	SECTION BOX: WELL'S STATIC WATER LEVEL 13.87 ft. below land surface measured on mo/day/yr 6/25/08										
<u></u>	N Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm										
	Est. Yield gpm: Well water was ft. after hours pumping gpm										
- NW - NE - WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well											
W 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)											
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs											
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs											
Sample was submitted Water Well Disinfected? Yes No X											
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped											
1 Ste	1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded										
(2) PVC 4 ABS 7 Fiberglass Threaded X											
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 8 ft., Dia in. to ft., Dia in. to ft.  Casing height below land surface 0.09 ft., Weight lbs./ft. Wall thickness or gauge No.											
Casing height below land surface 0.09 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)											
ISCREEN OR DEREGRATION OPENINGS ARE:											
1 Continuous slot (3) Mill slot 5 Guaze 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)											
2 Louvered snutter 4 Key punched o wire wrapped 8 Saw Cut 10 Other (specify)											
SCREEN-PERFORATED INTERVALS: From 8 ft. to 23 ft. From ft. to ft.											
From ft. to ft. From ft. to ft.											
GRAVEL PACK INTERVALS: From 7 ft. to 23 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: 0-2 feet											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-2 feet Grout Intervals From 2 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											
	er lines	5 Cess pool							water well	below)	
3 Wat	ertight sewe	er lines 6 Seepage p	oit 9 Feed		12 Fertiliz	_		well/ gas	well		
Direction	from well?	S			How many	/ feet? <u>~9</u>	1				
FROM	TO		LOGIC LO	G	FROM	TO		PLUC	GING INTE	ERVALS	
0		Concrete									
3		Brown silty clay, m	oist, low to	moderate							
		plasticity, no odor									
8		Brown silty clay, m	oist, low to	moderate							
		plasticity, no odor						w-,			
13		Brown silty clay, w	et, low to m	noderate							
10		plasticity, no odor	-4 1 t-	- d							
18		Brown silty clay, w	et, low to m	noderate			Eluch	ount wei	ver from BO	NX/	
		plasticity, no odor			ļ	-	riusnm	ount wal	ver Hom BO	, vv	
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)  6/24/08  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) 7/30/08											
under the h	usiness name	of Larsen & Asso	ciates. Inc		by (signat	ure)	\n_		· · · · · · · · · · · · · · · · · · ·		
									nd Environment	Bureau of Water.	
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	your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.									