239 9341 SPW1-08

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Shawnee

Fraction: NE 1/4 NE 1/4 NE 1/4

Section Number: 16

Township Number: T 11 S

Range Number: R 15 (E) W

Distance and direction from nearest town or city street address of well if located within city? Approximately 2 miles north of Topeka

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: 39.101147

Longitude: -95.743811

Elevation: Unknown

Datum: NAD83

Data Collection Method: WAAS GPS Unit

2 WATER WELL OWNER: Consolidated RWD #4 of Shawnee Co.

RR#, St. Address, Box # : 3333 NW Button Rd.

City, State, ZIP Code : P.O. Box 750777 Topeka, KS 66675

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

W --NW-- --NE-- E (x)

--SW-- --SE--

S

4 DEPTH OF COMPLETED WELL 57 ft.

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

WELL'S STATIC WATER LEVEL 26.31 ft. below land surface measured on mo/day/yr 08-25-08

Pump test data: Well water was Not checked ft. after ____ hours pumping ____ gpm

Est. Yield Unknown 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 Feedlot 6 Oil field water supply 9 Dewatering (12) Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Temporary Supply Well

Was a chemical/bacteriological sample submitted to Department? Yes ____ No ✓ If yes, mo/day/yrs

Sample was submitted ____ Water well disinfected? Yes ✓ No ____

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 ____

Blank casing diameter 5 in. to 45 ft., Diameter ____ in. to ____ ft., Diameter ____ in. to ____ ft.

Casing height above land surface 24 in., weight 2.36 lbs./ft. Wall thickness or gauge No. .214

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 Gauzed 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 45 ft. to 55 ft., From ____ ft. to ____ ft.

From ____ ft. to ____ ft., From ____ ft. to ____ ft.

GRAVEL PACK INTERVALS: From 20 ft. to 58 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 ____

Grout Intervals: From ____ ft. to ____ ft., From 0 ft. to 20 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 None known

3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well

Direction from well? ____ How many feet? ____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil			
2	7	Clay, dark gray, hard			
7	22	Clay, dark brown, hard, sticky			
22	26	Clay, gray, soft, silty			
26	38	Sand and gravel, medium to fine, loose,			
		clean, tan color			
38	41	Clay, black, silty, soft			
41	55	Sand and gravel, tan color, medium to fine,			
		loose			
55	56	Shale, weathered, hard			
56	58	Shale, dark gray, hard, with limestone streaks			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) (constructed) (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) 08-25-08 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 09-02-08

Under the business name of Clarke Well & Equipment, Inc. by (signature) [signature]

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. Please fill in blanks, underline 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.