

1 LOCATION OF WATER WELL: County: Shawnee	Fraction NE 1/4 SW 1/4 SW 1/4	Section Number 9	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 3 miles north of Topeka		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 39.103505 Longitude: -95.75876 Elevation: Unknown Datum: NAD83 Data Collection Method: WAAS GPS Unit		
2 WATER WELL OWNER: Consolidated RWD #4 RR#, St. Address, Box # : 3333 NW Button Rd. City, State, ZIP Code : Topeka, KS 66675				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 565 ft.			
	Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.			
	WELL'S STATIC WATER LEVEL 26.0 ft. below land surface measured on mo/day/yr 10-20-08			
	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				
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr _____				
Sample was submitted _____ Water well disinfected? Yes <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> _____ Threaded _____
2 PVC 4 ABS 7 Fiberglass		
Blank casing diameter 14 in. to 48.5 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.		
Casing height above land surface 12 in., weight 54.57 lbs./ft. Wall thickness or gauge No. 375		
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 48.5 ft. to 55.5 ft., From _____ ft. to _____ ft.		
GRAVEL PACK INTERVALS: From 30 ft. to 56 ft., From _____ ft. to _____ ft.		

6 GROUT MATERIAL: 1 Neat Cement **(2)** Cement grout **(3)** Bentonite 4 Other _____

Grout Intervals: From **5** ft. to **25** ft., From **25** ft. to **30** 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	43	48	Sand and gravel, fine, medium, gravel gray
2	20	Clay, dark gray			in color
20	29	Clay, brown	48	55.5	Sand and gravel, fine, medium, some
29	34	Sand and gravel, fine, medium, gravel brown			coarse, gravel brown in color
		in color	55.5	56	Shale, gray
34	35	Clay, gray			
35	37	Sand, fine, medium, gray			
37	41	Sand and gravel, fine, medium, gravel gray			
		in color			
41	43	Clay, gray, with gravel			

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) **10-20-08** 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) **10-23-08**

Under the business name of **Clarke Well & Equipment, Inc.** by (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.