556 13535 WATER WE I	OB-5-15	Form W	WC-5	Division of W	ater Resources App. N	0
	OF WATER WELL:	Fraction				Range Number
County:	Shawnee	1/4 SW 1/4 NW	V 1/4 NW 1/4	18		R 15 ⊠E □ W
Street/Rural Address of Well Location; if unknown, distance & direction				Global Positioni	ng System (GPS) inf	ormation:
from nearest town or intersection: If at owner's address, check here				Latitude: 39.098169 (in decimal degrees)		
Approximately 3.5 miles east of Silver Lake.				Longitude: -95.797041 (in decimal degrees)		
				Elevation: Unknown		
2 WATER WELL OWNER: Shawnee County RWD #4				Datum: ☐ WGS 84, ☒ NAD 83, ☐ NAD 27 Collection Method:		
RR#, Street Address, Box #: 3333 NW Button Rd.				GPS unit (N	Make/Model: WAAS)
City, State, ZIP Code : Topeka, KS 66675				GPS unit (Make/Model: WAAS Digital Map/Photo, Topographic Map, Land Survey		
E					3 m, ⋈ 3-5 m, □	5-15 m, □>15 m
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 53 ft.						
WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1) ft (2) ft (3) ft						
SECTION BOX: N Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. well's STATIC WATER LEVEL 21.20 ft. below land surface measured on mo/day/yr 09/04/15						
Pump test data: Well water was not checked ft. after hours pumping gpm						
×NW EST. YIELD gpm. Well water was ft. after hours pumping gpm						
W XNW Bore Hole Diameter 5 in. to 56 ft., and in. to ft.						
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well						
sw se Domestic Feedlot Oil field water supply Dewatering Other (Specify below)						
Industrial Domestic-lawn & garden Monitoring well Observation Well						
Was a chemical/bacteriological sample submitted to Department? Yes No						
S If yes, mo/day/yr sample was submitted						
Water well disinfected?						
5 TYPE OF CASING USED: Steel PVC Other						
CASING JOINTS: A Glued Clamped Welded Threaded Other (Specify)						
Casing diameter 2 in. to 26 ft., Diameter in. to ft., Diameter in. to ft.						
Casing diameter 2 in. to 26 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in., Weight .70 lbs./ft., Wall thickness or gauge No154						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
Steel Stainless Steel PVC Other (Specify)						
Brass Galvanized Steel None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:						
Course wround Described Design Design Course wround Described by the Design of Design Course by the Design of Design						
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)						
SCREEN-PERFORATED INTERVALS: From 26 ft. to 51 ft., From ft. to ft.						
From ft. to ft., From ft. to ft.						
Continuous stot Mill stot Gauze wrapped Torch cut Diffice flotes Notice (open fiole)						
From ft. to ft., From ft. to ft.						
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other Grout Intervals: From 0 ft. to 20 ft., From ft. to ft., From ft. to ft.						
What is the nearest source of possible contamination: Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)						
Sower lines Cesspool Sewage Japon Fuel storage Ahandoned water well						` • •
		it 🔲 Feedyard	Fertilizer s	orage 🔲 Oil wel	l/gas well	None Known
Direction from well Distance from well						
FROM TO	LITHOLOG	IC LOG	FROM	TO LITHO	LOG (cont.) <u>or</u> PLl	JGGING INTERVALS
0 4	Topsoil					
4 16	Clay, gray	المعالم				
16 29	Sand, coarse to very	iirie, with mealum				
29 51	to fine gravel Sand, coarse to fine,	with fine graval	 			
29 51 51 56	Shale, gray	with title graver	 			
31 30	Jitaic, gray					
			 			
			 			,2,000 100 000 000 000 000 000 000 000 000
 						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 🗖 constructed. 🗆 reconstructed. or 🗖 plugged						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 09/04/15 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) 09/10/15						
under the busine	ess name of Clarke	e Well & Equipment	t, Inc.	by (signature)	It has	
INSTRUCTIONS: U	Jse typewriter or ball point pe	n. PLEASE PRESS FIRML	Y and PRINT	learly. Please fill in b	lanks and check the corre	ct answers. Send three copies
(white, blue, pink) Telephone 785-296	to Kansas Department of Health 5-5522. Send one copy to WAT	and Environment, Bureau ER WELL OWNER and re	tot water, Geo	ogy Section, 1000 S our records. Include	w Jackson St., Suite 420, fee of \$5.00 for each o	onstructed well. Visit us at
Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.						
KSA 82a-1212						