

**WATER WELL RECORD Form WWC-5**

Original Record  Correction  Change in Well Use

Division of Water Resources App. No.

Well ID MW-3

**1 LOCATION OF WATER WELL:** County: Shawnee Fraction NW NW SW SW Section Number 36 Township Number T 1811 S Range Number R 15 E W

**2 WELL OWNER:** Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:   
 Business: Mikey's Certified Auto Care, LLC  
 Address: 2219 SW 10th Avenue  
 Address:  
 City: Topeka State: KS ZIP: 66603

**3 LOCATE WELL WITH "X" IN SECTION BOX:**  
 N  
  
 S  
 W E  
 1 mile

**4 DEPTH OF COMPLETED WELL:** ..... 21 ..... ft.  
 Depth(s) Groundwater Encountered: 1) ..... 9 ..... ft.  
 2) ..... N/A ..... ft. 3) ..... N/A ..... ft., or 4)  Dry Well  
 WELL'S STATIC WATER LEVEL: ..... 8.88 ..... ft.  
 below land surface, measured on (mo-day-yr) 12-13-17  
 above land surface, measured on (mo-day-yr) .....  
 Pump test data: Well water was ..... N/A ..... ft.  
 after ..... N/A ..... hours pumping ..... N/A ..... gpm  
 Well water was ..... N/A ..... ft.  
 after ..... N/A ..... hours pumping ..... N/A ..... gpm  
 Estimated Yield: ..... N/A ..... gpm  
 Bore Hole Diameter: ..... 8.25 ..... in. to ..... 21 ..... ft. and  
 ..... N/A ..... in. to ..... N/A ..... ft.

**5 Latitude:** ..... 39.05102 ..... (decimal degrees)  
**Longitude:** ..... 95.70461 ..... (decimal degrees)  
 Horizontal Datum:  WGS 84  NAD 83  NAD 27  
 Source for Latitude/Longitude:  
 GPS (unit make/model: .....)  
 (WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....

**6 Elevation:** 942.01 ..... ft.  Ground Level  TOC  
 Source:  Land Survey  GPS  Topographic Map  
 Other .....

**7 WELL WATER TO BE USED AS:**

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	2. <input type="checkbox"/> Irrigation	3. <input type="checkbox"/> Feedlot	4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID .....	6. <input type="checkbox"/> Dewatering: how many wells? .....	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	8. <input checked="" type="checkbox"/> Monitoring: well ID <u>MW-3</u>	9. Environmental Remediation: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....	11. Test Hole: well ID .....	12. Geothermal: how many bores? .....	13. <input type="checkbox"/> Other (specify): .....
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Was a chemical/bacteriological sample submitted to KDHE?  Yes  No If yes, date sample was submitted: .....  
 Water well disinfected?  Yes  No

**8 TYPE OF CASING USED:**  Steel  PVC  Other ..... CASING JOINTS:  Glued  Clamped  Welded  Threaded  
 Casing diameter ..... 2 ..... in. to ..... 6 ..... ft., Diameter ..... N/A ..... in. to ..... N/A ..... ft., Diameter ..... N/A ..... in. to ..... N/A ..... ft.  
 Casing height above land surface ..... 0 ..... in. Weight ..... N/A ..... lbs./ft. Wall thickness or gauge No. Sch 40 .....

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 Steel  Stainless Steel  Fiberglass  PVC  Other (Specify) .....  
 Brass  Galvanized Steel  Concrete tile  None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:  
 Continuous Slot  Mill Slot  Gauze Wrapped  Torch Cut  Drilled Holes  Other (Specify) .....  
 Louvered Shutter  Key Punched  Wire Wrapped  Saw Cut  None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 6 ..... ft. to 21 ..... ft., From N/A ..... ft. to N/A ..... ft., From N/A ..... ft. to N/A ..... ft.  
 GRAVEL PACK INTERVALS: From 4 ..... ft. to 21 ..... ft., From N/A ..... ft. to N/A ..... ft., From N/A ..... ft. to N/A ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other Concrete 0 to 2 feet  
 Grout Intervals: From 2 ..... ft. to 4 ..... ft., From N/A ..... ft. to N/A ..... ft., From N/A ..... ft. to N/A ..... ft.

Nearest source of possible contamination:  
 Septic Tank  Lateral Lines  Pit Privy  Livestock Pens  Insecticide Storage  
 Sewer Lines  Cess Pool  Sewage Lagoon  Fuel Storage  Abandoned Water Well  
 Watertight Sewer Lines  Seepage Pit  Feedyard  Fertilizer Storage  Oil Well/Gas Well  
 Other (Specify) .....

Direction from well? West Distance from well? 50 ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Fill			
1	8	SILT sandy clayey plstc grey-tan-orange			
8	13	SILT dry/brittle some gravel grey-tan-org			
13	21	CLAY			

Notes:

**11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo-day-year) 12-13-2017 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 759 ..... This Water Well Record was completed on (mo-day-year) 1-13-18 ..... under the business name of RAZEK Environmental, LLC ..... Signature [Signature]



Proposed soil boring  
 Proposed soil boring with hydrologic testing  
 Proposed monitoring well

Sanitary Sewer Line  
 Water Line

Mikey's Facility Boundary  
 Building  
 Fence

Former Product Lines  
 Former Pump Island  
 Former Tank Basin

1 inch = 50 feet

DESIGNED BY:	CC	<b>Detailed Site Map</b>		<b>Figure 2</b>	<b>Limited Site Assessment Work Plan</b>
DRAWN BY:	CC	<b>Mikey's Certified Auto Care, LLC</b>			
CHECKED BY:	RW	2219 SW 10th Avenue	Topeka, KS		
APPROVED BY:	CC				
DATE:	OCTOBER 2017	professional   practical   below-ground U4-089-14937			