| WATER WELL RECORD Form WWC-5 KSA 82a-1212 | | | | | | | | |
|--|---|---------------------------|-----------------------|----------------------|----------------------|-------------------|---|--|
| | * . | TER WELL | Fraction | | | ction Number | | Range Number |
| | SHAWNEE | | NE1/4 | | | 23 | <u>т 11 s</u> | R 15 (E)W |
| Distance and direction from nearest town or city street address of well if located within city? 3029 NW Hiway 24 Topeka, KS | | | | | | | | |
| 2 WATE | R WELL OW | VNER: Amer | | ion Post | | | ļ | - 1111111111111111111111111111111111111 |
| ليبو | Address, Box | | 9 NW Hiway | | - 0 0 | | Board of Agricultur | re, Division of Water Resources |
| City. State | e. ZIP Code | : Tope | eka, KS | 66618 | | | Application Numbe | er: |
| 3 LOCAT | TE WELL'S L | OCATION WITH 4 | DEPTH OF CO | OMPLETED WEL | 55 | ft. ELEVA | TION: | |
| AN "X" | ' IN SECTION | N 20/1. | Depth(s) Groundw | water Encountered | d 1 3% | ft. 2 | 2 f | ft. 3 |
| <u> </u> | | Y X V | WELL'S STATIC | WATER LEVEL . | 29' ft.t | elow land su | rface measured on mo/day | _{//yr} 10-14-87 |
| | 1 | | | | | | | |
| Pump test data: Well water was ft. after hours pumping gpm Est. Yield | | | | | | | | |
| <u>.</u> | 1 | | | | | | | |
| Wile W | | | | | | | 11 Injection well | |
| 7 | SW | | 1 Domestic | 3 Feedlot | 6 Oil field wa | | 9 Dewatering | 12 Other (Specify below) |
| 1 [| 2M | 36 | 2 Irrigation | 4 Industrial | | | | |
| ll L | i | I V | Was a chemical/b | acteriological sam | ple submitted to Dr | epartment? Y | esNoX; If y | yes, mo/day/yr sample was sub- |
| S mitted Water Well Disinfected? Yes X No | | | | | | | | |
| 5 TYPE | OF BLANK (| CASING USED: | | 5 Wrought iron | | | | luedX Clamped |
| 1 St | reel | 3 RMP (SR) |) | 6 Asbestos-Ceme | ent 9 Other | (specify below | | /elded |
| 2 P\ | | 4 ABS | | 7 Fiberglass | | | Th | hreaded |
| | | | | | | | ft., Dia | in. to ft. |
| Casing height above land surface | | | | | | | | |
| TYPE OF | SCREEN O | R PERFORATION | MATERIAL: | | 7 PV | | 10 Asbestos-ce | ment |
| 1 St | | 3 Stainless | steel | 5 Fiberglass | | MP (SR) | 11 Other (spec | ;ify) |
| 2 Br | | 4 Galvanized | | 6 Concrete tile | 9 ABS | s | 12 None used | (open hole) |
| it : | | RATION OPENING | | | Gauzed wrapped | | 8 Saw cut | 11 None (open hole) |
| | ontinuous slo | | | | Wire wrapped | | 9 Drilled holes | |
| 100 | ouvered shutt | • | y punched | | Forch cut | | ` | |
| SCREEN- | PERFORATI | ED INTERVALS: | | | | | | ft. toft. |
| | | | From | ft. <i>t</i> | ιο <u></u> | ft., Fror | m f | ft. toft. |
| | GRAVEL PA | ACK INTERVALS: | | | | | | ft. toft. |
| | | | From | ft. t | | ft., Fron | | ft. to ft. |
| 6 GROUT MATERIAL: 1 Neat cernent 2 Cernent grout 3 Bentonite 4 Other Grout Intervals: From 4 ft. to 24 ft. from ft. to ft. ft. | | | | | | | | |
| 1 | | | | ft., From | ft. 1 | | | |
| | | | | | | | 4 Abandoned water well | |
| | | | | 7 Pit privy | | | • | 5 Oil well/Gas well |
| 2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit | | | • | 8 Sewage lagoon | | | • | 6 Other (specify below) |
| | _ | _ | ge pit | 9 Feedyar | d | | cticide storage | |
| FROM | from well? | | LITHOLOGIC L | OG | FROM | How mar | iny feet? 220 | OGIC LOG |
| 0 | 6 | Top Soil | LITTIOLOGIO L | <u> </u> | 11000 | | LIIIVE | SGIC LOG |
| 6 | 30 | Clay-Brown | | | | $\overline{}$ | | |
| 30 | 34 | Fine Sand-E | | | | | | |
| 34 | 51 | | | d-Med-Grave | 1-Brown | | | |
| 51 | 55 | II II | 11 11 | # II | Green, Bl | 120 | | |
| <u> </u> | 33 | | | | <u> </u> | | | * 1, * |
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| 4 | | 1 | | | | | | |
| 1. | | (| | | | | | NATIONAL DESCRIPTION OF THE PROPERTY OF THE PR |
| | | i | | | | | | |
| | | <u> </u> | | | | | | |
| 7 CONTI | PACTOR'S (| OB LANDOWNER | 'S CERTIFICATIO | This water w | -" (1) conetru | | | |
| 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) 10-14-87 | | | | | | | | |
| | | | | | | | on (mo/day/yr) | 10.07 |
| 1 | | me of Strader | | | JE VVEII NOCCIU Was | | ture) | L |
| INSTRUC | CTIONS: Use ty | ypewriter or ball point p | pen. PLEASE PRESS | S FIRMLY and PRINT | | blanks, underline | e or circle the correct answers. | Send top three copies to Kansas |
| | | | | | | | | |
| records. | ent of Health at | nd Environment, Bure | au of Water Protectic | on, Topeka, Kansas 6 | 66620-7320, Telephor | ne: 913-862-93L | 50. Send one to WATER WELL | OWNER and retain one for your |