

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Shawnee</u>	SE 1/4 NE 1/4 NW 1/4	25	T 11 S	R 15 E/W

Distance and direction from nearest town or city street address of well if located within city?

I-70 & Macvickar; Topeka, Kansas

2 WATER WELL OWNER: <u>City of Topeka; Dept. of Public Works</u>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: <u>215 SE 7th</u>	Application Number:
City, State, ZIP Code: <u>Topeka, Kansas 66603</u>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>49</u> ft. ELEVATION: <u>875</u> ft.	
	Depth(s) Groundwater Encountered: 1. <u>20</u> ft. 2. _____ ft. 3. _____ ft.	
	WELL'S STATIC WATER LEVEL: <u>24</u> ft. below land surface measured on mo/day/yr <u>4/19/85</u>	
	Pump test data: Well water was <u>25</u> ft. after <u>6</u> hours pumping <u>15</u> gpm	
	Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm	
	Bore Hole Diameter: <u>12</u> in. to <u>49</u> ft., and _____ in. to _____ ft.	
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 10 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only <u>10 Observation well</u>		
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____		
Water Well Disinfected? Yes <u>X</u> No _____		

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<u>1</u> Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) _____ Welded _____
2 PVC	4 ABS	7 Fiberglass	Threaded <u>X</u>
Blank casing diameter: <u>4</u> in. to <u>43</u> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.			
Casing height above land surface: <u>28</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>Schedule 80</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel <u>3</u> Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____ 3 Mill slot 7 Torch cut 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot 3 Mill slot <u>2</u> Wire wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 7 Torch cut 9 Drilled holes 10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From <u>43</u> ft. to <u>49</u> ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <u>3</u> ft. to <u>49</u> ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____
Grout Intervals: From <u>0</u> ft. to <u>3</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:				
1 Septic tank <u>4</u> Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____ 13 Insecticide storage _____				
Direction from well? <u>all around</u>				How many feet? <u>20'</u>

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0.0	2.0	Topsoil			
2.0	9.0	Brown silty clay			
9.0	12.0	Brown sandy silt			
12.0	18.0	Brown fine sand			
18.0	22.0	Brown fine to medium sand, trace medium sand			
22.0	26.0	Gray medium sand, trace coarse sand			
26.0	30.0	Gray medium sand			
30.0	36.0	Gray medium to coarse sand, trace fine sand			
36.0	42.0	Gray medium sand, trace clay			
42.0	49.0	Gray medium-coarse sand			
49.0	Total	Depth			

7 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) 4/30/85 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 102 This Water Well Record was completed on (mo/day/yr) 5/15/85 under the business name of Layne-Western Co., Inc. by (signature) Dan D. Smith

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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.