WATE	R WELL	RECORD	Form WWC-5	Ε	ivision of Wa	ater Reso	ources; App. No.			
1 LOCA	TION OF	WATER WELL:	Fraction		Section N	umber	Township Nu	imber	Range Number	
County:	nd direction	nawnee	or city street address of	SE %	Clobal Box	itioning	T 11	S nal dea	R 16 E	
County: Shawnee										
2 WATER WELL OWNER: Yingling (NW Reo Project) RR#, St. Address, Box # : 2640 NW Topeka Blvd.  Longitude: W Elevation: Datum: above mean sea level										
2 WATER WELL OWNER: Yingling (NW Reo Project)					Elevation:					
City State 7IP Code : Topeka KS 66612					Datum: above mean sea level					
RR#, St. Address, Box # : 2640 NW Topeka Blvd. City, State, ZIP Code : Topeka, KS 66612 Data Collection Method: legal survey  3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 42 ft.										
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 42 ft.  LOCATON AS-19										
1	AN "X" I	N Depth(s) Grou	ndwater Encountered I		.10 17	ft. 2		ft. 3	ft.	
SECT	ION BOX:	WELL'S STA	TIC WATER LEVEL		ft. below la	nd surfa	ice measured o	n mo/d	lay/yr	
WITH AN "X" IN SECTION BOX:  N  Pump test data: Well water was  N  Est. Yield  WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									ing gpm	
									ing gpm	
-NW	/ NE	WELL WATE	R TO BE USED AS: 5	Public	water supply	/ 8 Ai	r conditioning	11 11	njection well	
W		E Domestic 3	Feed lot 6 Oil field w	ater su	pply	9 Dew	atering (	2) Oth	er (Specify below)	
		2 Irrigation 4	Industrial 7 Domestic	(lawn 8	garden)	10 Mon	itoring well		Air Sparge	
-sw	/ <del></del>	Was a chemica	l/haatarialagigal sample	cubmit	tad ta Danar	tmant?	Vac No	ν.	If year malday/sum	
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/o									n yes, morday/yrs	
S Sample was submitted Water Well Disinfected? Yes No X  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										
5 TYPE	OF CASIF	NG USED: 5	Wrought Iron	Conc	rete tile	CAS	ING JOINTS:	Glued	Clamped	
1 Ste	cei .	1 ADS 7	Aspestos-Cement S	Otne	r (specify be	now)		Throat	dod <b>V</b>	
Blank casi	PVC4 ABS7 FiberglassThreaded XBlank casing diameter2 in. to39 ft., Dia in. to41-42 ft., Dia in. toft									
Casing height below land surface ft Weight lbs /ft Wall thickness or gauge No.										
Casing height below land surface ft., Weight lbs./ft. Wall thickness or gauge No.  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)										
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 Gauze 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 39 ft. to 41 ft. From ft. to ft.										
From ft. to ft. From ft. to ft.										
GRAVEL PACK INTERVALS:         From         32         ft. to         42         ft. From         ft. to           From         ft. to         ft. From         ft. to									o ft.	
			From	ft. to		ft. Fr	om	ft. t	o ft.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3 Bentonite (4) Other Cement: 0-27 ft.										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Cement: 0-27 ft.  Grout Intervals From 27 ft. to 32 ft. From ft. to ft. From ft. to ft.										
What is the nearest source of possible contamination:										
	tic tank				stock pens		ecticide Storag		16 Other (specify	
2 Sewer lines 5 Cess pool 8 Sewage lagoon (11) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well										
	from well?	or times o seepage			ny feet?	15 011	wen, gas wen			
FROM	ТО	LITHO	LOGIC LOG	FRO		T	PLUGGING	GINT	ERVAIS	
0	1	Asphalt	LOGIC LOG	1100	10		LEGGGIA	7 11411	ZICVALS	
1	6	Clay with silt, brown,	moist, no odor							
6	18		medium grained, brown,							
10	21	moist, no petroleum o								
18	31	Sand with clay, fine gr	ained, gray, moist,	<del> </del>						
31	42		gray, poorly sorted, wet,	<u> </u>						
		petroleum odor								
						Flushn	nount waiver	from <b>E</b>	30W	
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) 10/2/08 and this record is true to the best of my knowledge and belief.										
Kansas Wa	ter Well Con	tractor's License No.	757 . This Wat	er Well	Record was	complete	on (mo/day)ye	ar) 1.	2/29/08	
under the b	usiness name	of Larsen and A	ssociates, Inc.	by (sign	nature)					
INSTRUCTIONS: Please fill in blanks 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 WAYER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.										