

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources: App. No. \_\_\_\_\_

<b>1 LOCATION OF WATER WELL:</b> County: <u>Shawnee</u>		Fraction <u>NE ¼ SE ¼ SE ¼</u>		Section Number <u>30</u>	Township Number <u>T 11 S</u>	Range Number <u>R 16 E</u>									
Distance and direction from nearest town or city street address of well if located within city? <u>201 N. Kansas, Topeka</u>				<b>Global Positioning System</b> (decimal degrees, min. of 4 digits) Latitude: <u>39.05923</u> Longitude: <u>95.67092</u> Elevation: <u>PIN: 880.92 TOC: 880.64</u> Datum: <u>above mean sea level</u> Data Collection Method: <u>legal survey</u>											
<b>2 WATER WELL OWNER:</b> <u>Topeka Metro Transit Authority</u> RR#, St. Address, Box # : <u>201 N. Kansas</u> City, State, ZIP Code : <u>Topeka, KS 66603</u>															
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>  <table border="1" style="width:100%; text-align:center; border-collapse: collapse;"> <tr><td colspan="2">N</td></tr> <tr><td>NW</td><td>NE</td></tr> <tr><td>W</td><td>E</td></tr> <tr><td>SW</td><td>SE <b>X</b></td></tr> <tr><td colspan="2">S</td></tr> </table>	N		NW	NE	W	E	SW	SE <b>X</b>	S		<b>4 DEPTH OF COMPLETED WELL</b> <u>34</u> ft. <b>MW1</b>				
	N														
	NW	NE													
W	E														
SW	SE <b>X</b>														
S															
Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.		WELL'S STATIC WATER LEVEL <u>26.35</u> ft. below land surface measured on mo/day/yr <u>3/31/09</u>		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm											
Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well		1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)											
		2 Irrigation 4 Industrial 7 Domestic (lawn & garden) <b>10</b> Monitoring well													
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> ; If yes, mo/day/yr		Sample was submitted _____ Water Well Disinfected? Yes _____ No <b>X</b>											
<b>5 TYPE OF CASING USED:</b>		5 Wrought Iron 8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____											
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) _____		Welded _____		Threaded <b>X</b>											
<b>2</b> PVC 4 ABS 7 Fiberglass		Blank casing diameter <u>2</u> in. to <u>14</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height below land surface <u>0.28</u> ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____											
TYPE OF SCREEN OR PERFORATION MATERIAL:		1 Steel 3 Stainless steel 5 Fiberglass <b>7</b> 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)											
SCREEN OR PERFORATION OPENINGS ARE:		1 Continuous slot <b>3</b> 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 <u>14</u> ft. to <u>34</u> ft. From _____ ft. to _____ ft.		From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS:		From <u>17</u> ft. to <u>37</u> ft. From _____ ft. to _____ ft.		From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
<b>6 GROUT MATERIAL:</b>		1 Neat cement 2 Cement grout <b>3</b> Bentonite <b>4</b> Other <b>Concrete: 0-2 ft</b>		Grout Intervals From <u>2</u> ft. to <u>17</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
What is the nearest source of possible contamination:		1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)		2 Sewer lines 5 Cess pool 8 Sewage lagoon <b>11</b> Fuel storage 14 Abandoned water well											
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well		Direction from well? _____ How many feet? _____													
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS										
0	0.5	Asphalt													
0.5	5	Silty clay, brown, with rubble, moist													
5	10	Silty clay grading to sandy silt, gray brown, moist to very moist													
10	20	Sandy silt, very fine sand, well sorted, very moist, at approximately 18 ft medium grained Sand layer 4 inches thick, brown to gray Brown, moist to very moist in parts													
20	25	No recovery			Flushmount waiver from BOW										
25	30	Sand, medium-coarse, poorly sorted, wet													
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <b>1</b> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3/30/09</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>757</u> . This Water Well Record was completed on (mo/day/year) <u>5/29/09</u> under the business name of <u>Larsen &amp; Associates, Inc.</u> by (signature) _____															
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 WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.															