WATER WELL RECORD   Form WWC-5   KSA 82a-1212

1	LOCATION OF WATER WELL:	Fraction				Section Number	Township Number	Range Number
County:	**Shawnee**	**SE** ¼	**SE** ¼	**SW** ¼		**17**	T **11** N	R **16** E

Distance and direction from nearest town or city street address of well if located within city?
110 NE Lyman Road, Topeka, KS

2 | WATER WELL OWNER: **KDHE-UST Program**
RR#, St. Address, Box # : **1000 SW Jackson Ste. 410**
City, State, ZIP Code : **Topeka, KS 66612**

Board of Agriculture, Division of Water Resources
Application Number:

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:

N
NW	NE
SW	SE

W — E   1 Mile

X

S

4 DEPTH OF COMPLETED WELL   **25**   ft. ELEVATION: _____

Depth(s) Groundwater Encountered 11.5 _____ ft. 2 _____ ft. 3 _____ Ft.

WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____

Pump test data: Well water was _____ Ft. after _____ hours pumping _____ Gpm

Est. Yield _____ Gpm: Well water was _____ Ft. after _____ Hours pumping _____ Gpm

Bore Hole Diameter   **10.5**   In. to   **25**   ft. and _____ in. to _____ Ft.

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 Lawn and garden (domestic)   10 Monitoring well   **SVE-1**

Was a chemical/bacteriological sample submitted to Department? Yes   No **X**   If yes, mo/day/yr sample was
Submitted   Water Well Disinfected? Yes   No **X**

5 | TYPE OF BLANK 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 _____
2 PVC   4 ABS   7 Fiberglass _____ Ft.,   Threaded   **X**

Blank casing diameter _____ **4** in. to   **6** Dia _____ In. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface _____ **FLUSH** In., weight   **SCH 40** Lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC   10 Asbestos-cement
1 Steel   3 Stainless steel   5 Fiberglass   8 RMP (SR)   11 Other (specify) _____
2 Brass   4 Galvanized steel   6 Concrete tile   9 ABS   12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped   8 Saw cut   11 None (open hole)
1 Continuous slot   3 Mill slot   6 Wire wrapped   9 Drilled holes
2 Louvered shutter   4 Key punched   7 Torch cut   10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From   **6** ft. to   **25** ft. From _____ ft. to _____ ft.
From _____ ft. to _____ ft. From _____ ft. to _____ Ft.

SAND PACK INTERVALS: From   **5.5** ft. to   **25** ft. From _____ ft. to _____ Ft.
From _____ ft. to _____ ft. From _____ ft. to _____ Ft.

6 | GROUT MATERIAL: 1 Neat cement   2 Cement grout   3 Bentonite   4 Other _____

Grout Intervals   From2   **0.5** ft. to   **2** From3   **2** to   **5.5** 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   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   **Contaminated Site**

Direction from well? _____   How many feet? _____

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1		**Concrete**			
1	12		**Silty, Sandy Clay**			
12	25		**Sand, Silty, fine to very fine grained**			
25	TD		**End of Borehole**			

7 | CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w
Completed on (mo/day/yr) _____ **08/08/11** _____ And this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. _____ **585** _____ This Water Well Record was completed on (mo/day/yr) **10/03/11**

under the business name of   **Associated Environmental, Inc.**   By (signature) **Bradley J Johnson**

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.