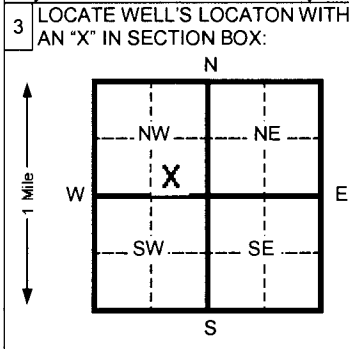


revised

1 LOCATION OF WATER WELL: County: Shawnee	Fraction SW ¼ SE ¼ NW ¼	Section Number 17	Township Number T 11 S	Range Number R 16 E
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Distance and direction from nearest town or city street address of well if located within city?
2640 NW Topeka Blvd., Topeka, KS

2 WATER WELL OWNER: **Graffiti Auto Sales**
RR#, St. Address, Box # : **2640 NW Topeka Blvd.** Board of Agriculture, Division of Water Resources
City, State, ZIP Code : **Topeka, KS 66612** Application Number:



4 DEPTH OF COMPLETED WELL **37.80** ft. ELEVATION: _____
Depth(s) Groundwater Encountered 1.5 **30.37** 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 **9.5** In. to **38** 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** **MW-18**
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 _____ **Threaded** **X**
Blank casing diameter **4** in. to **18** 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 **18** ft. to **38** ft. From _____ ft. to _____ ft.
From _____ ft. to _____ ft. From _____ ft. to _____ ft.
SAND PACK INTERVALS: From **16** ft. to **38** 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 From 2 **0** ft. to **0.5** Ft. From 3 **0.5** Ft. to **16** 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'	0.333'		Gravel paving			
0.333'	5'		Silty Clays			
5'	12'		Clayey Silts			
12'	20'		Silty Clays			
20'	24'		Silts and Clayey Silts			
24'	38'		Fine and coarser Sands			
38'	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 was Completed on (mo/day/yr) **05/27/14** 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) **06/26/14**
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, Division of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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