

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

1 LOCATION OF WATER WELL: County: <u>Shawnee</u>	Fraction <u>NE 1/4 NE 1/4 SE 1/4</u>	Section Number <u>3</u>	Township Number T <u>12</u> S	Range Number R <u>15</u> EW
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Distance and direction from nearest town or city street address of well if located within city?  
3301 SW Topeka Blvd., Topeka, KS.

2 WATER WELL OWNER: Bellairre Shopping Center  
 RR#, St. Address, Box #: 534 S Kansas Avenue Suite 925  
 City, State, ZIP Code: Topeka, KS 66603  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL <u>15'</u> ft. ELEVATION: Depth(s) Groundwater Encountered <u>1.10'</u> ft. 2. .... ft. 3. .... ft. WELL'S STATIC WATER LEVEL <u>10.07</u> ft. below land surface measured on mo/day/yr <u>12-12-97</u> 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 <u>8 1/2</u> in. to <u>15</u> in. to .... in. to .... ft. WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only <u>10</u> Monitoring well 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>No</u>
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5 TYPE OF BLANK CASING USED:  
 1 Steel 2 PVC 3 RMP (SR) 4 ABS  
 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass  
 8 Concrete tile 9 Other (specify below)  
 CASING JOINTS: Glued ..... Clamped .....  
 Welded ..... Threaded X  
 Blank casing diameter 2.375 in. to 5' ft., Dia ..... in. to ..... ft., Dia ..... in. to SDR 13 ft.  
 Casing height above land surface Flush Mt. in., weight ..... lbs./ft. Wall thickness or gauge No. SCH 40  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 RMP (SR) 8 ABS 9 Other (specify) 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)  
 SCREEN-PERFORATED INTERVALS: From 15' ft. to 5' ft. From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 15' ft. to 3' ft. From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other  
 Grout Intervals: From 3' to 2' ft. From 2' to 0' ft. From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage Fouler 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)  
 Direction from well? East How many feet? 200'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	CONCRETE			
4	15	SANDSTONE, yellow-red/brn., clayey at top, blk mottled, no odor			
		SHALE, gray, moist, sandy, fissue, calcareous, bedding planes, no odor			
<i>F.M. OK'd by Don Taylor</i>					

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) 12-12-97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 539 This Water Well Record was completed on (mo/day/yr) 2-24-98 under the business name of JB Environmental Drilling by (signature) James Beckel

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, Bureau 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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SEC  
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