

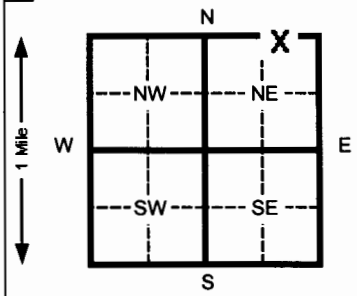
1 LOCATION OF WATER WELL: County: **Shawnee** Fraction: **NW ¼ NE ¼ NE ¼** Section Number: **11** Township Number: **T 12 S** Range Number: **R 15** EW

Distance and direction from nearest town or city street address of well if located within city?

**2619 SW 21<sup>st</sup> Street, Topeka, Kansas**

2 WATER WELL OWNER: **Kwik Shop, Inc.** RR#, St. Address, Box # : **734 E. 4<sup>th</sup> Avenue** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : **Hutchinson, Kansas 67504** Application Number:

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



4 DEPTH OF COMPLETED WELL: **19.5** ft. ELEVATION: \_\_\_\_\_  
 Depth(s) Groundwater Encountered 1 **14.0** ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL **9.56** ft. below land surface measured on mo/day/yr **08/28/07**  
 Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield **NA** gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Bore Hole Diameter **8.5** in. to **19.5** 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  
 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: 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued \_\_\_\_\_ Clamped \_\_\_\_\_  
**2** PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded \_\_\_\_\_  
 7 Fiberglass Threaded **X**  
 Blank casing diameter **2.375** in. to **9.5** ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface **Flush Mount** in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. **Schedule 40**  
 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 **19.5** ft. to **9.5** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From **19.5** ft. to **7.5** 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 **0.0** ft. to **1.0** ft. From **1.0** ft. to **7.5** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination: **10** Livestock pens 14 Abandoned water well  
**11** Fuel storage 15 Oil well/ Gas well  
 1 Septic tank 4 Lateral lines 7 Pit privy 12 Fertilizer storage 16 Other (specify below)  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 13 Insecticide storage  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard  
 Direction from well? **North-northwest** How many feet? **140**

FROM	TO	CODE	LITHOLOGIC LOG
0.0	1.0		<b>Black silty clay, friable, moist</b>
1.0	5.0		<b>Dark brown-gray silty clay, very firm, moist</b>
5.0	8.0		<b>Dark brown-black silty clay, firm, moist</b>
8.0	10.0		<b>Black silty clay, very firm, moist</b>
10.0	13.0		<b>Brown-orange silty clay, laminated black and gray, very firm, moist-very moist</b>
13.0	17.5		<b>Brown-orange sandy clay, firm, very moist-wet</b>
17.5	19.5		<b>Brown silty clay, laminated, firm, wet-very moist</b>
<b>Exception to K.A.R. 28-30-6(b) (1) and (e) approved by D. Taylor, KDHE-BOW.</b>			

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/yr) **08/21/07** and this record is true to the best of my knowledge and belief. Kansas  
 Water Well Contractor's License No. **692** This Water Well Record was completed on (mo/day/yr) **09/17/07**  
 under the business name of **Quad State Services, Inc.** by (signature)

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