WA	IEK WELL	RECORD	Form WWC-5) Div	ision of Wa	iter Reso	urces; App. No.		
		WATER WELL: Shawnee	Fraction	NIE .	Section Nu	ımber	Township Number	Range Number	
County: Shawnee SW 1/2 NE 1/2 NE 1/2 S R 15 E Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)									
located within city? 2910 SW Topeka Blvd, Topeka KS Latitude: N 39.01405 Longitude: W 95.68739									
2 W	ATER WELL	OWNER: KDHE			Elevation: RIM: 959.35; TOC: 958.98				
RR#, St. Address, Box # : 1000 SW Jackson Blvd					Detumi NAVIDOO				
City, State, ZIP Code : Topeka KS 66612						Data Collection Method: legal survey			
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 18.02 ft.									
	OCATON				OW20				
	'ITH AN "X" I	N Depth(s) Groun	dwater Encountered 1			.ft. 2	ft. 3	ft.	
WITH AN "X" IN SECTION BOX: N Depth(s) Groundwater Encountered 1 WELL'S STATIC WATER LEVEL 8.15 ft. 2 ft. 2 ft. 2 ft. 4 WELL'S STATIC WATER LEVEL Pump test data: Well water was Ft. after hours pu Est. Yield gpm: Well water was ft. after hours pu								lay/yr 2/14/13	
	N N	Pump	test data: Well water	was	ft.	after	hours pump	ing gpm	
		Est. Yield	gpm: Well water	was	ft.	after	hours pump	ing gpm	
1	-nw- - 'x-	WELL WATER	TO BE USED AS: 5						
w -	-i-l-i-	E Domestic 3	Feed lot 6 Oil field v	vater supp	iy .a.dan\ 6	OM	atering 12 Oth	ier (Specify below)	
W E 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well									
SW SE Was a shamical/hasterial acidal comple sylmitted to Department? Yes No. V. 15 yes and								If you maldaylam	
	S	Sample was sub	Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs Sample was submitted Water Well Disinfected? Yes No X						
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped									
1 Steel 3 PMP (SP) 6 Ashestos Coment 0 Other (specify heloxy) Wolded								d	
(2)PVC 4 ABS 7 Fiberglass Threaded X									
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 3.02 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.37 ft., Weight lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify)									
Casing height below land surface 0.37 ft., Weight lbs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 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 @Mill slot 5 Course avenned 7 Torch out 0 Drilled halos 11 None (or or hele)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 3.02 ft. to 18.02 ft. From ft. to ft.									
SCRE	EN-PERFORA	TED INTERVALS:	From 3.02	It. to	18.02	tt. Fro	om tt. t	o ft.	
	an		From	. ft. to		ft. Fro	om ft. t	oft.	
	GRAVEL PAC	CK INTERVALS:	From 2	.ft. to	18.40	ft. Fro	om ft. t	oft.	
			From	. ft. to		n. Fro	om ft. t	oft.	
GRAVEL PACK INTERVALS: From 2 ft. to 18.40 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 Concrete: 0-1 Grout Intervals From 1 ft. to 2 ft. From ft. to ft. From ft. to ft.									
Grout Intervals From 1 ft. to 2 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)									
2 Sewer lines 5 Cess pool 8 Sewage lagoon (11) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well									
	on from well?				feet? ~21		well gas well		
FROI			OGIC LOG		TO		DI LICCINIC DEPT	EDVALO	
0		Asphalt	OGIC LOG	FROM	10		PLUGGING INTI	CKVALS	
0.3		Brown silty clay							
10		Tan shale							
					 			,	
]	Flushm	ount waiver from B	BOW	
						_			
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) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 2/25/13									
		ractor's License No of Larsen & Assoc	757 . This Wat	er Well Red by (signatu		mpieted	on (my/day/rear) 2	U3/13	
						ortmant -	f Head and Emilian	Duman of West	
Geology	Section, 1000 SW.	Jackson St., Suite 420, To	opeka, Kansas 66612-1367.	ree copies to Telephone 78	5-296-5522.	Send on	e to WATEL WELL OW	NER and retain one for	
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Heath, and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WALL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.									