WATER WELL RECORD Form WWC			sion of Water			MW6		
X Original Record Correction Change in W	·	Resor	irces App. No.		Well ID			
i i	action SE 1/4 NE 1/4 SE	14 NE 14		er Township Num T 12		Number 5 X E W		
2 WELL OWNER: Last Name: Fi	rst: S	treet or Rural A	ddress where we	ell is located (if unk	nown, distance	and direction		
Business: KDHE from nearest town or intersection): If at owner's address, check here:						ere:		
Address: 1000 SW Jackson Blvd ~80' S of 3201 SW Topeka Blvd., Topeka, KS								
Address: City Topeka State: KS ZIP: 66612								
3 LOCATE WELL 4 DEPTH OF COMP		.5 ft !	5 Latitude:	39.010	49 (de	cimal degrees)		
WITH "X" IN Depth(s) Groundwater Encountered: 1) ft Longitude 95.68792 (decimal degrees)								
SECTION BOX: 2)ft 3)	ft, or 4) Dry \	Vell	ell Horizontal Datum X WGS 84 NAD 83 NAD 27					
			ft. Source for Latitude/Longitude:					
below land surface, measured on (mo-day-yr)								
NW NE x above land surface, measured on (mo-day-yr) Pump test data: Well water was ft			X Land Survey Topographic Map					
	after hours numping onm			· · · · ·				
Water well was ft								
sw se after hours	pumpingg	pm (6 Elevation		Ground Le	vel X TOC		
Estimated Yield:	Estimated Yield:gpm			Land Survey		Topographic Map		
Bore Hole Diameter: 7.25 in to ft,			nd Other					
in to t								
7 WELL WATER TO BE USED AS:								
I Domestic: 5 Public Water Supply	: well ID	10	Oil Field	Water Supply: lease	;			
Household 6 Dewatering: how m		1	Test Hole: wel	IID				
Lawn & Garden 7 Aquifer Recharge: well ID			Cased Uncased Geotechnical					
Livestock 8 X Monitoring: well ID MW6 12 Geothermal: How many bores?								
2 Irrigation 9 Environmental Remediation: well ID a) Closed Loop Horizontal Vertical								
	Soil Vapor Extraction			Surface Di	scharge	Inj. of Water		
4 Industrial Recovery	Injection		Other (spe	ecity):	***************************************	***************************************		
Was a chemical/bacteriological sample submitted to KDHE? Yes X No If yes, date sample was submitted:								
Water well disinfected? Yes X No								
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clampled Welded X Threaded Casing diameter 2 in. to 5 ft, Diameter in. to ft, Diameter in. to ft,								
Casing diameter 2 in. to 5 ft, Diameter in. to ft, Diameter in. to ft, Casing height above land surface -0.29 in. Weight lbs./ft. Well thickness or gauge No								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
Steel Stainless Steel Fiberglass X PVC Other (Specify)								
Brass Galvanized Steel Concrete tile None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
Continuous Slot X Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)								
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From 5 ft. to 16.5 ft, From ft. to ft, From ft. to ft,						ft,		
GRAVEL PACK INTERVALS: From 3 ft.	to 16.5 ft, From			ft, From				
9 GROUT MATERIAL: Neat cement Cement grout X Bentonite X Other Concrete: 0-0.5'								
Grout intervals: From U.S. it. to 3 tt, From tt. to tt, From tt. to tt,								
Nearest source of possible contamination:								
Septic Tank Lateral Lines	Pit Privy		tock Pens	Insecticide	•			
Scwer Lines Cess Pool	Sewage Lagoon	_	Storage	=	Water Well			
Watertight Sewer Lines Seepage Pit	Feedyard	Fertil	izer Storage	Oil Well /	Gas Well			
Other (Specity) Direction from well? Unknown Distance from well? Unknown ft								
	•		T TO 1					
10 FROM TO LITHOLOGIC	LUG	FROM	TO	LITHO. LOG (cor	it.) or PLUGGIN	G INTERVALS		
0 1 Clayey silt 1 6 Silty clay		 	 	· · · · · · · · · · · · · · · · · · ·				
6 6.5 Silty clay, rock fragments		†						
6.5 8.5 Hard rock layer								
8.5 16.5 Silty clay								
		ļ <u> </u>						
Notes: KDHE ID: Van Vleck Oil and Gas; U4-089-15199						inciallad at		
Target of monitoring well is shallow groundwater, <20' of grout was installed at the direction of KDHE.								
Ine direction of KDHE. It CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, or plugged under my								
jurisdiction and was completed on (mo-day-year) 7/30/20 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's								
License No 757 This Water Well Record			0					
under the business name of Larsen & Associates, Inc.	*		Signature ()			
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Careau of Way 2001 Section,								
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records: Telephone 785-296-5524.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015								