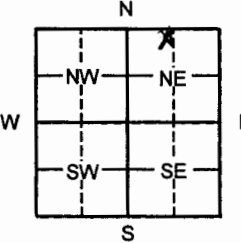


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: Fraction <u>NE ¼ NW ¼ NE ¼</u>		Section Number <u>4</u>	Township Number <u>T 12 S</u>	Range Number <u>R 16 E</u>
County: <u>Shawnee</u>		Global Positioning System (decimal degrees, min. of 4 digits)		
Distance and direction from nearest town or city street address of well if located within city? <u>3101 E. 6th St., Topeka, KS 66607</u>		Latitude: <u>NA</u>		
		Longitude: <u>NA</u>		
2 WATER WELL OWNER: <u>Low Cost Holding</u>		Elevation: <u>TOC: 891.53; RIM: 891.90</u>		
RR#, St. Address, Box # : <u>PO BOX 728</u>		Datum: <u>NAVD88</u>		
City, State, ZIP Code : <u>Lawrence, KS 66044-0728</u>		Data Collection Method: <u>legal survey</u>		
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL <u>15</u> ft.			
	MW3			
	Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft.			
	WELL'S STATIC WATER LEVEL <u>6.03</u> ft. below land surface measured on mo/day/yr <u>5/26/10</u>			
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm				
Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm				
WELL WATER TO BE USED AS: <u>5</u> Public water supply <u>8</u> Air conditioning <u>11</u> Injection well				
<u>1</u> Domestic <u>3</u> Feed lot <u>6</u> Oil field water supply <u>9</u> Dewatering <u>12</u> Other (Specify below)				
<u>2</u> Irrigation <u>4</u> Industrial <u>7</u> Domestic (lawn & garden) <u>10</u> Monitoring well				
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yrs				
Sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u>				
5 TYPE OF CASING USED:				
1 Steel		3 RMP (SR)		6 Asbestos-Cement
<u>2</u> PVC		4 ABS		7 Fiberglass
5 Wrought Iron		8 Concrete tile		CASING JOINTS: <u>Glued</u> <u>Clamped</u>
1 Steel		3 RMP (SR)		6 Asbestos-Cement
<u>2</u> PVC		4 ABS		7 Fiberglass
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