

MW8R

<b>1 LOCATION OF WATER WELL:</b> County: Shawnee	Fraction NE ¼ NE ¼ NE ¼ NW ¼	Section Number 17	Township Number T 12 S	Range Number 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here   
 ~30' E of 1245 SE 29th.. Topeka. KS

**Global Positioning Systems (GPS) information:**  
 Latitude: NA (in decimal degrees)  
 Longitude: NA (in decimal degrees)  
 Elevation: NA  
 Horizontal Datum  WGS84,  NAD83,  NAD27  
 Collection Method:

**2 WATER WELL OWNER:** Ramzi Atie  
 RR#, St. Address. Box #: 1245 SE 29th St.  
 City, State ZIP Code: Topeka. KS

GPS unit (Make/model): \_\_\_\_\_  
 Digital Map/Photo,  Topographic Map  Land Survey  
 Est. Accuracy:  <3 m,  3-5 m,  5-15 m,  >15 m

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

		N		
		X		
NW			NE	
W				E
	SW		SE	
		S		

**4 DEPTH OF WELL** 9.31 ft. MW8R  
 WELL'S STATIC WATER LEVEL NA ft  
 WELL WAS USED AS:  
 Domestic  Public Water Supply  Dewatering  
 Irrigation  Oil Field Water Supply  Monitoring  
 Feedlot  Domestic (Lawn & Garden)  Injection Well  
 Industrial  Air Conditioning  Other \_\_\_\_\_  
 Was a chemical/bacteriological sample submitted to Department? Yes  No

**5 TYPE OF BLANK CASING USED:**

<input type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specific below)
<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	_____

Blank casing diameter 2 in. Was casing pulled? Yes  No  If yes, how much 5'  
 Casing height above or below land surface NA in.

**6 GROUT PLUG MATERIAL:**  Neat cement  Cement grout  Bentonite  Other Soil: 0-1'  
 Grout Plug Intervals: From 1 ft to 9.31 ft, From \_\_\_\_\_ ft to \_\_\_\_\_ ft, From \_\_\_\_\_ ft to \_\_\_\_\_ ft,  
 What is the nearest source of possible contamination:  
 Septic tank  Seepage pit  Fuel storage  Other (specify below) \_\_\_\_\_  
 Sewer lines  Pit privy  Fertilizer storage \_\_\_\_\_  
 Watertight sewer lines  Sewage lagoon  Insecticide storage \_\_\_\_\_  
 Lateral lines  Feed yard  Abandoned water well Direction from well? \_\_\_\_\_  
 Cess pool  Livestock pens  Oil well/Gas well How many feet? \_\_\_\_\_

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	1	Soil			
1	9.31	Bentonite			

KDHE ID: Ramona's Convenience Store: U4-089-11599

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was plugged under my jurisdiction and was completed on (mo/day/year) 9/8/2015 and this record is true to the best of my knowledge and belief. Kansas Water Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 10/22/2015 under the business name of Larsen & Associates, Inc. By (signature) \_\_\_\_\_

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records  
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5324