

1 LOCATION OF WATER WELL: County: Shawnee	Fraction SW ¼ SW ¼ SE ¼ NW ¼	Section Number 6	Township Number T 12 S	Range Number 16 X E 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

~130' NW of 1700 Topeka Blvd., Topeka, KS

**Global Positioning Systems (GPS) information:**

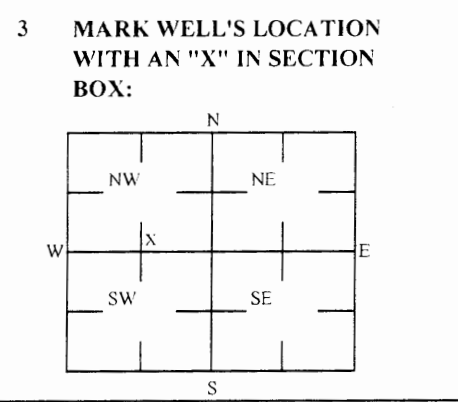
Latitude: NA (in decimal degrees)  
 Longitude: NA (in decimal degrees)  
 Elevation: NA

Horizontal Datum  WGS84.  NAD83.  NAD27

Collection Method:  
 GPS unit (Make/model: \_\_\_\_\_)  
 Digital Map/Photo,  Topographic Map  Land Survey

Est. Accuracy:  <3 m.  3-5 m.  5-15 m.  >15 m

2 WATER WELL OWNER: Kwik Shop Inc.  
 RR#: St. Address, Box #: 734 E 4th  
 City, State ZIP Code: Hutchinson, KS



4 DEPTH OF WELL 20 ft.

WELL'S STATIC WATER LEVEL \_\_\_\_\_ ft

WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input checked="" type="checkbox"/> Monitoring
<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well
<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> 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 3'

Casing height above or below land surface NA in.

6 GROUT PLUG MATERIAL:  Neat cement  Cement grout  Bentonite  Other Soil: 0-3'

Grout Plug Intervals: From 3 ft to 20 ft, From \_\_\_\_\_ ft to \_\_\_\_\_ ft, From \_\_\_\_\_ ft to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel storage	<input type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feed yard	<input type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Soil			
3	20	Bentonite			

KDHE ID: Kwik Shop #729; U4-089-14746

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/2-3/18 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) 7/5/2018 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 785-296-5524.