WATER WEI		n WWC-5		vision of Water		W. 11 ID	MW10	
		ange in Well Use		sources App. No.		Well ID		
1 LOCATION County: SHA	OF WATER WELL: WNEE	Fraction SE ¹ / ₄ NW ¹ / ₄ SW ¹ / ₄		ection Number 18	Township Number		nge Number 6 ■ E □ W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: KANSAS DEPT. OF TRANSPORTATION Address: 3210 SW TOPEKA BLVD Address:								
City: TOP		S ZIP: 66611						
3 LOCATE WEI WITH "X" IN	4 DEPTH OF CO		ft. 5 Latitude					
SECTION BOX: Depth(s) Groundwater Encountered: 1)					Longitude: 95.68663 (decimal degrees) Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27			
N	2)					⊔ NAD 8	83 ⊔ NAD 27	
below land surface, measured on (mo-day-yr)					Source for Latitude/Longitude: GPS (unit make/model:)			
above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No)			
Pump test data: Well water was ft.				Land	■ Land Survey □ Topographic Map			
W after hours pumping gpm Well water was ft.				☐ Onlir	Online Mapper:			
SW SE -	afterho		6 Elevation: 991.84ft. ☐ Ground Level ■ TOC					
	Estimated Yield:	gpm	6 Elevation: .991.04			Ground	Level TOC	
S	: in. to							
1 mile in. to ft.								
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID								
Household 6. Dewatering: how many wells?					11. Test Hole: well ID			
☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical			
					12. Geothermal: how many bores?			
2.					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water			
4. Industrial Recovery Injection					13. Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:								
Was a chemical bacteriological sample submitted to RDHE: 1 es No 11 yes, date sample was submitted.								
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other								
Casing diameter								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous Slot ☐ 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 .10								
SCREEN-PERFO	KATED INTERVALS: F	om ft. to .4	ft., From	ft. to	ft., From	ft. to		
GRAVEL PACK INTERVALS: From 8 ft. to 20 ft., From ft. to ft., From ft. to ft. or ft. or ft. ft. or ft. ft. or ft. ft. ft. ft. ft. ft. ft. ft. ft.								
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other Concrete Surface Completion 0 -1 Grout Intervals: From 0 ft. to ft., From 1 ft. to 6 ft., From 6 ft. to 8 ft.								
Nearest source of possible contamination:								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
Sewer Lines	Cess Poo			Fuel Storage	Abandone		Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)								
Direction from well?								
10 FROM TO	LITHOL	OGIC LOG	FROM		THO. LOG (cont.) or Pl	LUGGING	G INTERVALS	
0 .5	ASPHALT							
.5 3.5 3.5 4.5	SILTY CLAY							
3.5 4.5 4.5 20	CLAY							
4.5	CLAT							
			Notes:	<u> </u>				
TOOLS.								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged								
under my jurisdiction and was completed on (mo-day-year) .8/8/18								
under the business name of ASSOCIATED ENVIRONMENTAL INC. Signature								
Mail 1 white of	opy along with a fee of \$5.00 for	each constructed well to: Kar	nsas Departmer	it of Health and Env	ironment, Bureau of Wate	r, GWTS S	ection,	
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								

