

**WATER WELL RECORD Form WWC-5**

Original Record  Correction  Change in Well Use

Division of Water Resources App. No.

Well ID MW1

**1 LOCATION OF WATER WELL:** Fraction  NE 1/4  NE 1/4  NW 1/4  NE 1/4 Section Number **17** Township Number **T 12 S** Range Number **R 16**  E  W  
 County: **SHAWNEE**

**2 WELL OWNER:** Last Name: **QURESHI** First: **ARSHEED** Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:   
 Business: **AJKC LLC**  
 Address: **1611 SE 29TH ST.**  
 Address:  
 City: **TOPEKA** State: **KS** ZIP: **66502**

**3 LOCATE WELL WITH "X" IN SECTION BOX:**

N			
---NW---			X
S		E	
W		E	
---SW---			---SE---

**4 DEPTH OF COMPLETED WELL:** **21.5** ft.  
 Depth(s) Groundwater Encountered: 1) **19** ft.  
 2) ..... ft. 3) ..... ft., or 4)  Dry Well  
 WELL'S STATIC WATER LEVEL: **18.64** ft.  
 below land surface, measured on (mo-day-yr) **7/10/18**.  
 above land surface, measured on (mo-day-yr) .....  
 Pump test data: Well water was ..... ft.  
 after ..... hours pumping ..... gpm  
 Well water was ..... ft.  
 after ..... hours pumping ..... gpm  
 Estimated Yield: ..... gpm  
 Bore Hole Diameter: ..... in. to ..... ft. and  
 ..... in. to ..... ft.

**5 Latitude:** **39.01499** (decimal degrees)  
**Longitude:** **95.65684** (decimal degrees)  
 Horizontal Datum:  WGS 84  NAD 83  NAD 27  
 Source for Latitude/Longitude:  
 GPS (unit make/model: .....)  
 (WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....

**6 Elevation:** **1030.45** ft.  Ground Level  TOC  
 Source:  Land Survey  GPS  Topographic Map  
 Other .....

**7 WELL WATER TO BE USED AS:**

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....
2. <input type="checkbox"/> Irrigation	6. <input type="checkbox"/> Dewatering: how many wells? .....	11. Test Hole: well ID .....
3. <input type="checkbox"/> Feedlot	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
4. <input type="checkbox"/> Industrial	8. <input checked="checked" type="checkbox"/> Monitoring: well ID <b>MW1</b>	12. Geothermal: how many bores? .....
	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> Other (specify): .....

**Was a chemical/bacteriological sample submitted to KDHE?**  Yes  No If yes, date sample was submitted: .....  
 Water well disinfected?  Yes  No

**8 TYPE OF CASING USED:**  Steel  PVC  Other ..... CASING JOINTS:  Glued  Clamped  Welded  Threaded  
 Casing diameter **2** in. to **21** ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. ....

**TYPE OF SCREEN OR PERFORMANCE 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 **11** ft. to **21** ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From **9** ft. to **21** ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other **Concrete Surface Completion 0-1** .....  
 Grout Intervals: From **0** ft. to **1** ft., From **1** ft. to **7** ft., From **7** ft. to **9** ft.

**Nearest source of possible contamination:**

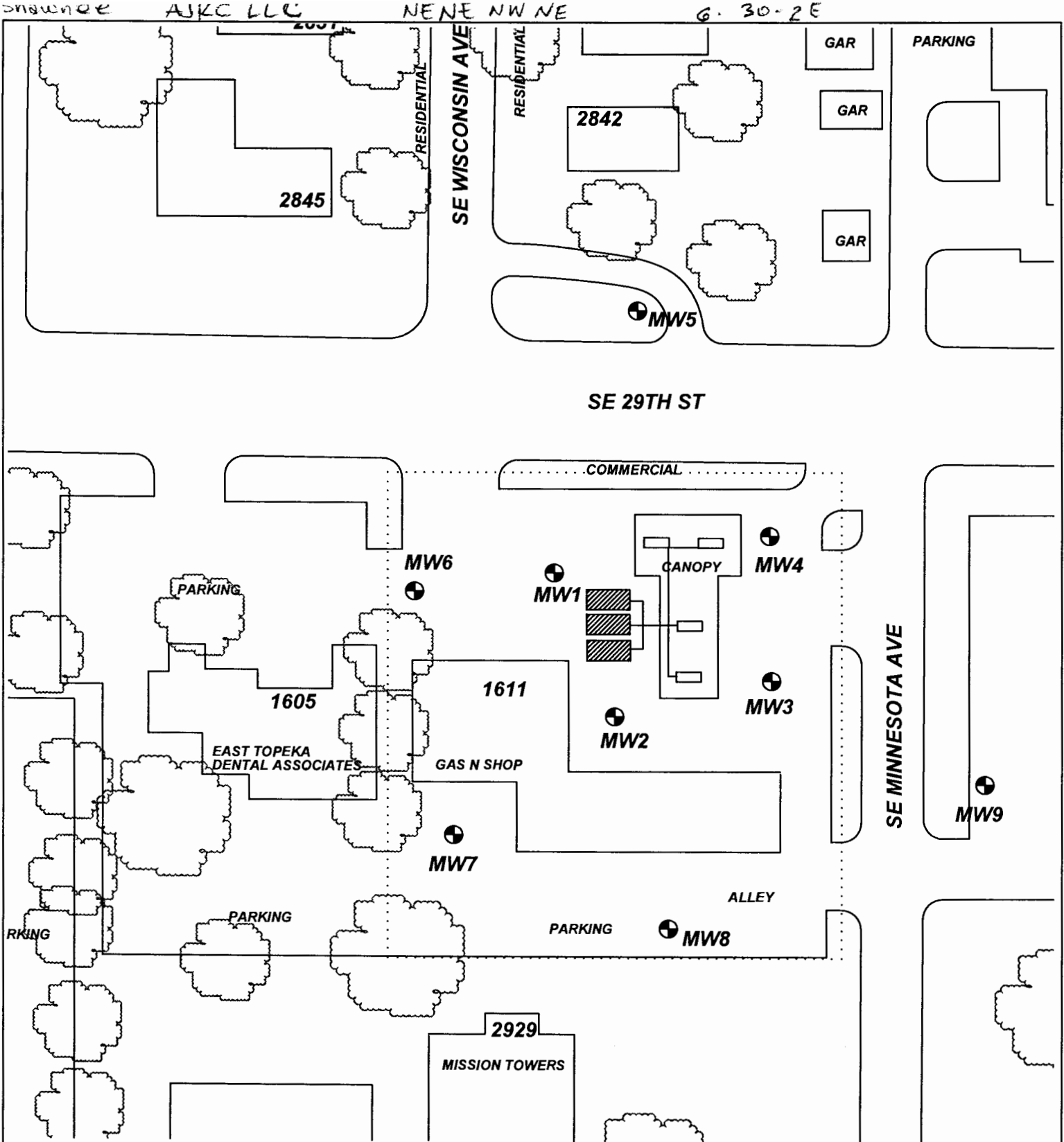
<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input checked="checked" type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify) .....				

Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	.5	CONCRETE			
.5	21.5	SILTY CLAY			
Notes:					

**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) **6/12/18** ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **585** ..... This Water Well Record was completed on (mo-day-year) **7/11/18** ..... under the business name of **ASSOCIATED ENVIRONMENTAL INC.** ..... Signature *[Handwritten Signature]* .....

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS 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



PROJECT: **AJKC LLC**

ADDRESS: **1611 SE 29TH ST.**

LOCATION: **TOPEKA, KS**

DRAWN BY: **B. STALNAKER** DATE: **3/23/18**

REVISED BY: **B. STALNAKER** DATE: **6/13/18**

AEI JOB #: **TF509** KDHE JOB #: **U4-089-15030**

TITLE:

**ASSOCIATED ENVIRONMENTAL INC.**

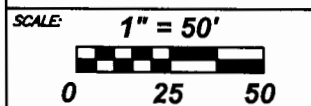
LEGEND:

- = SUBJECT PROPERTY
- = MONITORING WELL
- = SUBJECT PROPERTY

RECEIVED

SEP 18 2018

BUREAU OF WATER



NOTES:  
No basements observed within 500'.