

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

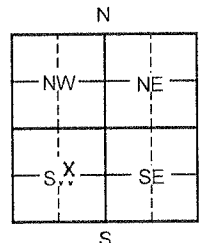
Table with 4 columns: LOCATION OF WATER WELL, Fraction, Section Number, Township Number, Range Number. Includes County: Geary, Fraction: SW 1/4 NE 1/4 SW 1/4, Section Number: 12, Township Number: T 12 S, Range Number: R 5 E.

Distance and direction from nearest town or city street address of well if located within city? 326 S. Washington, Junction City, Ks Global Positioning System (decimal degrees, min. of 4 digits) Latitude: N 39.01995° Longitude: W 96.82986° Elevation: RIM: 1098.51; TOC: 1098.02 Datum: NAD27 Data Collection Method: legal survey

2 WATER WELL OWNER: KDHE (Former Apco) RR#, St. Address, Box #: 1000 SW Jackson, Ste 410 City, State, ZIP Code: Topeka, KS 66612

Elevation: RIM: 1098.51; TOC: 1098.02 Datum: NAD27 Data Collection Method: legal survey

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 50 ft. MWIR

Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. WELL'S STATIC WATER LEVEL 35.10 ft. below land surface measured on mo/day/yr 5/22/14 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: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10) Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yr Sample was submitted Water Well Disinfected? Yes No X

5 TYPE OF CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued Clamped Welded Threaded X

Blank casing diameter 2 in. to 30 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.49 ft., Weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From 30 ft. to 50 ft. From ft. to ft. GRAVEL PACK INTERVALS: From 28 ft. to 50.4 ft. From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1ft Grout Intervals From 1 ft. to 28 ft. From ft. to ft. From ft. to ft.

What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well

Direction from well? Within the basin How many feet? Within the basin

Table with 6 columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows describe geological layers from 0 to 50.4 ft depth.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 5/22/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 6/17/14 under the business name of Larsen & Associates, Inc. by (signature)

INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.

Greary Co.

**State of Kansas**  
**KDHE/BER Well Tag Form**

Former Apco

KDHE Project Code:

<b>U</b>	<b>5</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>9</b>	<b>4</b>	<b>6</b>
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Well Tag Number	Well Number
<b>0050161</b>	<b>MW1R</b>
<b>0050162</b>	<b>MW2R</b>
<b>0050161</b>	<b>MW3R</b>
<b>0050163</b>	<b>MW5R</b>

After completing this form, photocopy it and keep the copy for your files.  
Send the original to the address below.

Kansas Department of Health & Environment  
Bureau of Environmental Remediation  
1000 SW Jackson, Suite 410  
Topeka, KS 66612-1367