| WATER | R WELL | RECORD | For | m WWC- | - 5 D | ivision of W | Vater Reso | ources; App. No. | | |
|---|--|-----------------------------|--------------|----------------|--------------|--------------|------------|-------------------------|--------------------------|--|
| County: | | WATER WELL: Douglas | NW 4 | NW ¼ | NE ¼ | 11 | l | Township Number | R 19 E | |
| Distance a | nd directio | n from nearest town | or city stre | et address o | of well if | Global Po | sitioning | g System (decimal de | grees, min. of 4 digits) | |
| located within city? 2811 Stone Barn Terrace, Lawrence, KS 66047 Latitude: NA | | | | | | | | | | |
| Longitude: NA | | | | | | | | | | |
| 2WATER WELL OWNER: Brenda Kappelman Elevation: NA | | | | | | | | | | |
| | | Box # : 2811 S | | | | Datum: | NA | | | |
| City, State, ZIP Code : Lawrence, KS 66047 Data Collection Method: legal survey | | | | | | | | | | |
| 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 180 ft. | | | | | | | | | | |
| LOCATON | | | | | | | | | | |
| WITH | AN "X" I | N Depth(s) Grou | ndwater En | countered 1 | | NA | ft. 2 | ft. 3 | ft. | |
| SECTI | WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 NA ft. 2 ft. 3 ft. SECTION BOX: WELL'S STATIC WATER LEVEL NA ft. below land surface measured on mo/day/yr | | | | | | | | | |
| | N 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 1 Injection well | | | | | | | | | | |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 1 Injection well | | | | | | | | | | |
| W I Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 2 Other (Specify below) | | | | | | | | | | |
| W E 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Geothermal | | | | | | | | | | |
| | | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs | | | | | | | | | | |
| S Sample was submitted Water Well Disinfected? Yes No X | | | | | | | | | | |
| 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped | | | | | | | | | | |
| 5 TIPE OF CASING USED: 5 Wrought from 6 Concrete tile CASING JOINTS: Glued Clamped | | | | | | | | | | |
| 1 Steel 3 RMP (SR) 6 Asbestos-Cement (9) Other (specify below) Welded Fusion | | | | | | | | | | |
| 1 Steel 3 RMP (SR) 6 Asbestos-Cement 2 PVC 4 ABS 7 Fiberglass Polyethylene Threaded Blank casing diameter 3/4 in. to 180 ft., Dia in. to ft., Dia in. to ft. | | | | | | | | | | |
| Blank casing diameter 3/4 in. to 180 ft., Dia in. to ft., Dia in. to ft. | | | | | | | | | | |
| Casing height below land surface 4 ft., Weight lbs./ft. Wall thickness or gauge No. 160 PSI | | | | | | | | | | |
| TVDE OF SCHEEN OF DEDUCED ATION MATERIAL. | | | | | | | | | | |
| 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) | | | | | | | | | | |
| 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) | | | | | | | | | | |
| ISCREEN 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) | | | | | | | | | | |
| 2 Louvered Shutter 4 Key punched o wire wrapped o Saw Cut 10 Other (specify) | | | | | | | | | | |
| SCREEN- | PERFORA | TED INTERVALS | : From _ | | π. το | | n. Fr | omıı. | ιοπ. | |
| SCREEN-PERFORATED INTERVALS: From ft. to ft. | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft. From ft. to ft. | | | | | | | | | | |
| | | | From | | ft. to | | _ ft. Fr | om ft. | to ft. | |
| 6 CROUT MATERIAL: 1 Neat cement 2 Cement grout (3 Rentonite (4) Other Soil: 0.4 ft | | | | | | | | | | |
| From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. What is the nearest source of possible contamination: | | | | | | | | | | |
| What is the record course of reagile contemination: | | | | | | | | | | |
| what is the hearest source of possible contamination. | | | | | | | | | | |
| 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify | | | | | | | | | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) | | | | | | | | | | |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well | | | | | | | | | | |
| Direction from well? How many feet? | | | | | | | | | | |
| FROM | TO | LITHO | LOGIC LO | G | FROM | 1 TO | | PLUGGING INT | ERVALS | |
| 0 | 15 | Clay, red brown | | | | | 4-180 | ft. borings plugged | | |
| 15 | 70 | Shale, gray | | | 0 | 4 | Soil | | | |
| 70 | 85 | Limestone, white | | ıy | 4 | 180 | Benton | nite | | |
| 85 | 180 | Shale and silty sha | ile, gray | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | 1011 | | 1 | | | |
| 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) 10/4-5/10 and this record is true to the best of my knowledge and belief. | | | | | | | | | | |
| | | | mo/day/year | | | | | | | |
| | | tractor's License No. | | | | | complete | on (no/day/year) 1 | 1/14/10 | |
| 1 | | of Larsen & Ass | | | _ by (sign | | | 9 | · D | |
| INSTRUCTI | ONS: Please | fill in blanks or circle to | Topeles Var | vers. Send top | three copie | to Kansas D | Department | of Health and Environme | nt, Bureau of Water, | |
| Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one 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. | | | | | | | | | | |

white