

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:	Fraction County: Douglas NW ¼ NE ¼	Section Number 12	Township Number T 13 S	Range Number R 19 E
Distance and direction from nearest town or city street address of well if located within city? ~100ft E of 1303 W. 23 rd St., Lawrence KS		Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>N 38.94219°</u> Longitude: <u>W 95.25018°</u> Elevation: <u>RIM: 851.16; TOC: 850.63</u> Datum: <u>WGS84</u> Data Collection Method: <u>legal survey</u>		

2 WATER WELL OWNER: KDHE
RR#, St. Address, Box # : 1000 SW Jackson Blvd
City, State, ZIP Code : Topeka, Blvd 66612

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>21.25</u> ft.
	Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
	WELL'S STATIC WATER LEVEL <u>9.12</u> ft. below land surface measured on mo/day/yr <u>8/17/15</u>
	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	3 RMP (SR)	6 Asbestos-Cement	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	7 Fiberglass	9 Other (specify below)	Welded _____
				Threaded X

Blank casing diameter 2 in. to 6.25 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
Casing height below land surface 0.53 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 6.25 ft. to 21.25 ft. From _____ ft. to _____ ft.
From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 4 ft. to 22.50 ft. From _____ ft. to _____ ft.
From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3** Bentonite **4** Other **Concrete: 0-1'**

Grout Intervals From 1 ft. to 4 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? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	Topsoil			
0.5	9	Mottled Brown and tan clay, w/ caliche Stringers			
9	21	Weathered silty shale			
22	22.5	Gravel			

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) 7/31/15 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) 8/21/15 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 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>.

DENNIS L HANDKE

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TOPEKA, KANSAS 66618
785-286-4047 Home
785-286-1990 Fax

Jessica Chapman
Larsen & Associates
1311 E. 25th Street, Suite B
Lawrence, Kansas, 66046

August 18, 2015

RE: Monitor Well Elevation Survey
1303 W. 23rd St., Lawrence

Proj. 15-00EE
Former June Gulf Service
U4-023-14694

Bench Mark: Chisled sq. on NW corner of concrete signal light base at NE Corner of property.
Elev: 854.08 North 5088.9 West 2447.7 (from SE Cor. Sec. 12-13-19E)

MW-1	rim	855.34	North	5198.0	SW1/4,SW1/4,SW1/4,SE1/4 (1-13-19)
	top pipe	854.86	West	2495.4	Lat= 38.94293 Long = 95.25059
MW-2	rim	855.84	North	5192.4	SW1/4,SW1/4,SW1/4,SE1/4 (1-13-19)
	top pipe	855.53	West	2616.8	Lat= 38.94294 Long = 95.25102
MW-3	rim	853.77	North	5070.3	NW1/4,NW1/4,NW1/4,NE1/4
	top pipe	853.35	West	2384.0	Lat= 38.94256 Long = 95.25022
MW-4	rim	851.16	North	4933.4	NW1/4,NW1/4,NW1/4,NE1/4
	top pipe	850.63	West	2364.5	Lat= 38.94219 Long = 95.25018
MW-5	rim	852.99	North	4952.2	NE1/4,NE1/4,NE1/4,NW1/4
	top pipe	852.62	West	2666.4	Lat= 38.94228 Long = 95.25124
MW-6	rim	853.62	North	5047.3	NE1/4,NE1/4,NE1/4,NW1/4
	top pipe	853.38	West	2674.5	Lat= 38.94255 Long = 95.25125

Lat & Long derived City of Lawrence West 7.5' quad map. WGS84.

Elevation established from city of Lawrence Bench Mark.

If you have any questions, please feel free to call me. Thank you for the opportunity to be of service to you.

Dennis L Handke RLS

