

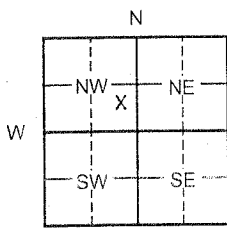
WATER WELL RECORD

Form WWC-5

 Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Johnson		Fraction NE ¼ SE ¼ NW ¼	Section Number 14	Township Number T 15 S R 23 E	Range Number 23 E
Distance and direction from nearest town or city street address of well if located within city? 603 N Webster St., Spring Hill, KS 66083			Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>N 38.74843°</u> Longitude: <u>W 94.82579°</u> Elevation: <u>RIM: 1074.49; TOC: 1074.06</u> Datum: <u>NAVD 29</u> Data Collection Method: <u>legal survey</u>		

2 WATER WELL OWNER: KDHE RR#, St. Address, Box # : 1000 SW Jackson City, State, ZIP Code : Topeka KS 66612		
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;">  </div>	4 DEPTH OF COMPLETED WELL <u>9.75</u> ft.	
	Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____ 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:		5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____	
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____	
(2) PVC	4 ABS	7 Fiberglass		Threaded X	
Blank casing diameter <u>2</u> in. to <u>3</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.	Casing height below land surface <u>0.43</u> 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 <u>3</u> ft. to <u>9.75</u> ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS:					
From <u>2</u> ft. to <u>10.25</u> ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ 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 ft
Grout Intervals	From <u>1</u> ft. to <u>2</u> 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:					
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? S			How many feet? ~350 ft		

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	Asphalt			
0.5	5	Brown silty clay			
5	10	Tan silty clay			
10	10.25	Limestone			
Flushmount waiver from BOW					

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) <u>3/26/14</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>757</u> . This Water Well Record was completed on (mo/day/year) <u>4/22/14</u> under the business name of Larsen & Associates, Inc. by (signature) _____	
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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

1820 NW 59th Terrace
TOPEKA, KANSAS 66618
785-286-4047 Home
785-286-1990 Fax

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

April 11, 2014

RE: Monitor Well Elevation Survey
407 N. Webster, Spring Hill, Kansas

Proj. 14-00J
John's Service
KDHE ID U4-046-10226

Bench Mark: Chisled X on top SW bolt of fire hydrant at NE corner of property.
Elev: 1072.61 North 3398.30 West 2846.62 (from SE Cor. Sec.14-15-23E)

MW-16	rim	1069.01	North	3636.52	SE1/4, NE1/4, SE1/4, NW1/4
	top pipe	1068.57	West	2658.24	Lat= 38.74823 Long = 94.82506
MW-17	rim	1074.49	North	3706.68	SE1/4, NE1/4, SE1/4, NW1/4
	top pipe	1074.06	West	2864.41	Lat= 38.74843 Long = 94.82579
MW-18	rim	1072.02	North	3630.96	SW1/4, NE1/4, SE1/4, NW1/4
	top pipe	1071.82	West	3183.45	Lat= 38.74822 Long = 94.82691
MW-19	rim	1073.75	North	3413.17	SW1/4, NE1/4, SE1/4, NW1/4
	top pipe	1073.51	West	3096.81	Lat= 38.74762 Long = 94.82660

Elevation derived from existing project.

Lat & Long derived from Spring Hill 7.5 Quad Map NAVD 29

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

April 11, 2014
Dennis L Handke RES

