

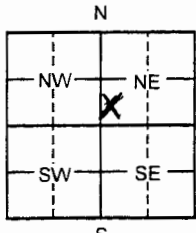
WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:	Fraction SW $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 15	Township Number T 19 S	Range Number R 11 E
County: Lyon		Distance and direction from nearest town or city street address of well if located within city? 2 Commercial, Emporia, KS		

2 WATER WELL OWNER: Richard Cipra RR#, St. Address, Box # : 23 Locust Lane City, State, ZIP Code : Emporia, KS, 66801	Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>N ° 2806.26</u> Longitude: <u>W ° 2472.52</u> Elevation: <u>RIM: 1137.72; TOC: 1137.34</u> Datum: <u>above mean sea level</u> Data Collection Method: <u>legal survey</u>
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3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 25 Ft.
	MW6 Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL Dry ft. below land surface measured on mo/day/yr 4/9/09 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 _____ in. to _____ in.	to _____ ft., Dia _____ in. to _____ in.	to _____ ft., Dia _____ in. to _____ in.	
Casing height below land surface _____ ft.	Weight _____ lbs./ft.	Wall thickness or gauge No. _____	
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless steel	5 Fiberglass	(7) PVC
2 Brass	4 Galvanized steel	6 Concrete tile	8 RM (SR)
SCREEN OR PERFORATION OPENINGS ARE:		9 ABS	11 Other (specify) _____
1 Continuous slot	(3) Mill slot	5 Gauze wrapped	7 Torch cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut
SCREEN-PERFORATED INTERVALS:		9 Drilled holes	11 None (open hole)
From _____ ft.	to _____ ft.	From _____ ft.	to _____ ft.
From _____ ft.	to _____ ft.	From _____ ft.	to _____ ft.
GRAVEL PACK INTERVALS:		10 Other (specify) _____	
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: 0-2 ft.
Grout Intervals	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
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
6 Other (specify below) _____	Direction from well? S			
				How many feet? ~45

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Asphalt	20	25	Limestone with grayish silty clay matrix.
1	5	Brown silty clay, high plasticity, sticky moist			
5	10	Gray mottled olive silty clay, high plasticity, sticky moist			
10	15	Light brown silty clay, high plasticity, Sticky, moist			
15	20	Grayish silty clay, low plasticity, sticky moist			
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) **4/7/09** 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) **6/22/09** 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>.