

WATER WELL RECORD

AS-9

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Sedgwick	Fraction ¼ SW ¼ SW ¼ NW ¼	Section Number 6	Township No. T 26 S	Range Number R / <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 1120 South Meridian Ave, Valley Center, KS		Global Positioning System (GPS) information: Latitude: 37.817967..... (in decimal degrees) Longitude: 97.37170..... (in decimal degrees) Elevation: unknown..... Datum: <input checked="" type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: Garmin Geko 201.....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input checked="" type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
2 WATER WELL OWNER: BP Amoco RR#, Street Address, Box #: Box 15748 City, State, ZIP Code : Shawnee Mission, KS 66285				

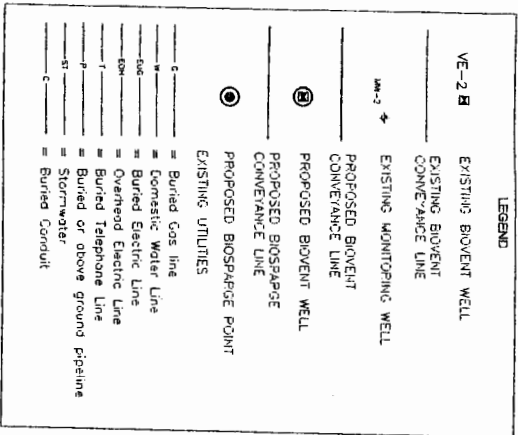
3 LOCATE WELL WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF COMPLETED WELL 39.5 ft. Depth(s) Groundwater Encountered (1) 14 ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL unknown ft. below land surface measured on mo/day/yr..... Pump test data: Well water was..... ft. after..... hours pumping..... gpm EST. YIELD..... gpm. Well water was..... ft. after..... hours pumping..... gpm Bore Hole Diameter 7.25 in. to 39.5 ft., and..... in. to..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input checked="" type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well air sparge point..... Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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5 TYPE OF CASING USED: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other..... CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 1 in. to 37 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft. Casing height above land surface 0 in., Weight 1.679 lbs./ft., Wall thickness or gauge No. 0.133"/Sch 40..... TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify)..... <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input checked="" type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify)..... SCREEN-PERFORATED INTERVALS: From 37 ft. to 39.5 ft., From..... ft. to..... ft. GRAVEL PACK INTERVALS: From 35 ft. to 39.5 ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft.	
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6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other..... Grout Intervals: From 4 ft. to 35 ft., From..... ft. to..... ft., From..... ft. to..... ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input checked="" type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well..... Direction from well unknown Distance from well unknown	
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FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	6.5	Dark grayish brown clay/silt			
6.5	7.5	Very dark grayish brown silt			
7.5	10	Olive brown clay			
10	12.5	Very fine sand			
12.5	13	Dark grayish brown silt			
13	39.5	Sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 6/16/09..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 616..... This Water Well Record was completed on (mo/day/year) 8/17/09..... under the business name of Thiele Geotech, Inc. by (signature)	
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html .	



	SITE ID	EASTING	NORTHING
BOWEN POINTS			
AS-1	163631.02	173561.70	65
AS-2	163631.17	173561.82	66
AS-3	163632.29	173561.88	67
AS-4	163629.30	173568.17	77
AS-5	163627.10	173564.16	78
AS-6	163626.11	173564.13	79
AS-7	163625.21	173564.13	80
AS-8	163625.11	173565.30	81
AS-9	163622.12	173562.74	82
AS-10	163622.12	173562.74	83
AS-11	163620.05	173564.05	84
AS-12	163620.05	173564.05	85
AS-13	163620.05	173564.05	86
AS-14	163620.05	173564.05	87
AS-15	163620.05	173564.05	88
BOWEN WELLS			
WE-2	163627.63	173561.63	53
WE-4	163627.35	173561.67	57
WE-5	163628.10	173562.62	62
WE-6	163630.10	173563.67	67

NOTES:

1. INFORMATION AND DATA SHOWN OR INDICATED ON THIS DRAWING WITH RESPECT TO EXISTING UTILITIES AND FACILITIES SHOULD NOT BE CONSIDERED ACCURATE REPRESENTATIONS OF ACTUAL SITE CONDITIONS. CONTRACTOR IS RESPONSIBLE FOR VERIFYING ACTUAL LOCATIONS.
2. CAP AND ENCASE SPARE LINES IN WELL BOX.



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