

## WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>SEDGWICK</b>		<b>NE 1/4 SE 1/4 NE 1/4</b>	<b>29</b>	<b>T 27 S</b>	<b>R 1 E</b>
Distance and direction from nearest town or city street address of well if located within city?					
2 WATER WELL OWNER: <b>KDHE</b>					
RR#, St. Address, Box #: <b>FORBES FIELD</b>					
City, State, ZIP Code: <b>TOPEKA KS</b>					
MW-7 Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: ..... ft. ELEVATION: .....			
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr <b>9/25/97</b>			
		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 ..... in. to ..... ft., and ..... in. to ..... ft.			
WELL WATER TO BE USED AS:		5 Public water supply      8 Air conditioning      11 Injection well 1 Domestic      3 Feedlot      6 Oil field water supply      9 Dewatering      12 Other (Specify below) 2 Irrigation      4 Industrial      7 Lawn and garden only      10 Monitoring well			
Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes      No					
5 TYPE OF BLANK CASING USED:					
1 Steel      3 RMP (SR)      5 Wrought iron      8 Concrete tile      CASING JOINTS: Glued ..... Clamped ..... 2 PVC      4 ABS      6 Asbestos-Cement      9 Other (specify below)      Welded ..... 7 Fiberglass      Threaded .....					
Blank casing diameter ..... in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.					
Casing height above land surface ..... in., weight ..... lbs./ft. Wall thickness or gauge No. ....					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel      3 Stainless steel      5 Fiberglass      8 RMP (SR)      10 Asbestos-cement 2 Brass      4 Galvanized steel      6 Concrete tile      9 ABS      11 Other (specify) ..... 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot      3 Mill slot      5 Gauzed wrapped      8 Saw cut      11 None (open hole) 2 Louvered shutter      4 Key punched      6 Wire wrapped      9 Drilled holes 7 Torch cut      10 Other (specify) .....					
SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.					
GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.					
6 GROUT MATERIAL: 1 Neat cement      2 Cement grout      3 Bentonite      4 Other .....					
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      14 Abandoned water well 2 Sewer lines      5 Cess pool      8 Sewage lagoon      11 Fuel storage      15 Oil well/Gas well 3 Watertight sewer lines      6 Seepage pit      9 Feedyard      12 Fertilizer storage      16 Other (specify below) 13 Insecticide storage					
Direction from well? ..... How many feet? .....					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	22	Bentonite	0	22	plugged 9-8-00 by
					Thornburg Contract Drilling
					(# 054)
<div style="font-size: 2em; font-weight: bold; margin: 0;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold; margin: 0;">SEP 18 2000</div> <div style="font-size: 1.5em; font-weight: bold; margin: 0;">BUREAU OF WATER</div>					
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) <b>9-23-97</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>513</b> This Water Well Record was completed on (mo/day/yr) <b>9-17-97</b> under the business name of <b>KDHE</b> by (signature) <b>[Signature]</b>					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

Amended Report

State of Kansas

Site I.D. Form

a. County:

BUTLER

b. Site I.D. number:

00105905

c. Owner Name:

TOWN &amp; COUNTRY MARKETS

d. Owner Address:

P.O. Box 17087

City WICHITA

State KS

Zip Code 67217

e. This site is located at (66 characters max.)

116 E. 7th St

Augusta, KS

f. Encoded Owner Name:

T O W N C O U N T R Y

g. Well (site) Number:

0 1 1

h. Encoding Scheme (Circle only one number):

1. If city owned, enter the first 11 letters of the city name (leave a blank space between words if more than one word is used).

2. If County owned, enter the first 11 letters of the county name ("Pottawatomie," for Pottawatomie) or abbreviate when it is necessary to show the type of site ("AL San Lndt," for Allen County Sanitary Landfill).

3. If business owned, write the first 11 letters of the business name (include RWDs, e.g., SN RWD1, for Shawnee Co. RWD 1).

4. If owned by an individual, enter the first 8 letters of the last name, a comma, and the first 2 letters of the first name.

5. If none of the above apply, encode the owner name in the most meaningful manner possible and explain procedure in item y.

i. This well (site) is in Sec. 27, Twn. 27, Rng. 4 (circle one) E W. From the (circle one) NE / SW / SE / NW corner of this section, this site is 5055.899 ft (circle one) N / S and 2104.944 ft (circle one) E / W, and is in the NE 1/4 of the NW 1/4 of the NW 1/4 of the NE 1/4.

j. Measurement Method Used (circle only one number):

1. Legal Survey  
6. Hand Wheel2. Absolute Survey  
7. USGS 7.5" Topomap3. GPS Survey  
8. County Road Map4. Technical Survey  
9. Other:

5. Compass &amp; Chain

k. Measured By:

RATHBONE

D

of (kk.)

N.A.

(Agency),

(Bureau).

l. The tag is attached to the

CASING

(ll.) using

STRA

m. Water Source (circle only one number):

1. Well

2. Spring

3. Pit

4. Lake / Pond

5. Stream / River

6. Ditch / Canal

7. Storm Runoff

8. Treated Water (Distribution System)

9. Waste water

n. Use(s) of Water (circle all that apply):

1. Domestic

2. Irrigation

3. Feedlot

4. Industrial

5. Public Water Supply

6. Oil Field Water Supply

7. Lawn and Garden Only

8. Air Conditioning

9. Dewatering

10. Monitoring Well Only

11. Injection Well

12. Artificial Recharge

13. Recreation

14. Other (Specify):

o. Type of Casing (circle only one number):

1. Steel

2. PVC

3. RMP (SR)

4. ABS

5. Wrought Iron

6. Asbestos Cement

7. Fiberglass

8. Concrete Tile

9. Other (specify or write "UNK" if unknown):

p. Form Completed By:

SHELLENBERGER

R

of (pp.)

N.A.

(Agency);

(Bureau).

q. Your Work Phone Number:

(316)

262

0171

qq. Date:

7

5

95

r. Program Code:

EP ER EE EU EL ET EJ  
PU PC PT PE PD PV PI WI WE PP

SC SG SN SW SE SP FK LM ES  
HL HD HF HS WC RP

AR KC  
GS US

s. Project Code:

0 2 0 0 8 1 1 5 3

t. Optional "well number codes": Consultant Code A, and / or (S)hallow, (I)ntermediate, or (D)eep S.u. Well Depth (TOC to TD): \_\_\_\_\_ ft. v. TOC is \_\_\_\_\_ ft. above/below ground elevation: w. TOC Elevation: 1228 / 18 ft.

x. DWR File Number:

xx. Is this a replacement well (circle one)? Yes / No

y. Comments:

kk. LAND MEASUREMENT, Inc

pp. TERRALON ENVIRONMENTAL, INC

Plugged 9-8-00 by  
Thornburg Contract Drilling #654

STATE OF KANSAS  
WELL: 00105905  
DO NOT REMOVE