LOCATION OF WATER WELL:   Praction   NW   NE   SW     Global   Post inning   Township Number   3   8   21   1   1   1   1   1   1   1   1	WATER WELL RECORD Form WWC-5 Division of Water Resources; App. No.															
Distance and direction from nearest town or city street address of well if located within city? 3   2 N Seneca St., Troy KS  WATER WELL OWNER: KDHE RR#, St. Address, Box # : 1000 SW Jackson City, State, ZIP Code	1 LOCA	TION OF	WATER WELL:	Fraction	NIE	<b>CW</b> 1/		17	ì	Т	3 s	R	<b>21</b> E			
Coard within city 312 N Seneca St., 1roy KS   Coard within city 31	County: County from pearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)															
Continue	Distance a	thin city? 2	12 N Seneca St. Tr	ov KS			اللك	antude:	IN 27.	/0701						
Type of Casing diameter   2 in to   20,05 ft,   5 in to   3 stailes state   2 in to   20,05 ft,   5 in to   10 ft   5 stailes state   3 stailes   3 stailes   3 stailes   3 stailes   3 state   3 stailes   3 state   3 stailes   3 stailes   3 state   3 stailes   3 stailes   3 state   3 stailes   3 state   3 stailes   3 stailes   3 state   3 stailes   3 stailes   3 state   3 stailes   3 state   3 stailes   3 state   3 stailes   3 stailes   3 state   3 state   3 stailes   3 state   3 stailes   3 state   3 stailes   3 state   3 stailes   3 state   3 state   3 stailes   3 stat	located WI	L	Longitude: W 95.09085°													
RR4 St Address Box # 1 1000 SW Jacksom City, State, ZIP Code	2 XX/ATT	2 WATER WELL OWNER: KDHE								Elevation: RIM: 1013.16; TOC: 1012.81						
City, State, ZIP Code  Topeke KS 66612  LOCATON  WTH AN "X" IN  SECTION BOX: N  WELL'S STATIC WATER LEVEL 18,30 ft. below land surface measured on mo/day/yr 10/24/13.  Pump test data: Well water was ft. after hours pumping gpm  WELL WATER TO BE USED AS: 5 Public water supply 9 Dewatering 12 Other (Specify below)  WELL'S STATIC WATER LEVEL 18,30 ft. below land surface measured on mo/day/yr 110/24/13.  Fump test data: Well water was ft. after hours pumping gpm  WELL WATER TO BE USED AS: 5 Public water supply 9 Dewatering 12 Other (Specify below)  WELL WATER TO BE USED AS: 5 Public water supply 9 Dewatering 12 Other (Specify below)  Type of CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped  Was a chemical/bacteriological sample submitted to Department? Yes No X, : If yes, mo/day/yrs sample was submitted  Type C A ABS 7 Fibreglass  Blank casing diameter 2 in to 20,05 ft. Dia in to ft. Dia in to ft.  Casing height below land surface 0.35 ft., Weight 1972  1 Steel 3 Staniless steel 5 Fibreglass 10.05 ft. Dia in to ft.  2 Brass 4 Galdwinized steel Concrete tile CASING JOINTS: Glued Clamped  2 Brass 4 Galdwinized steel Concrete tile CASING JOINTS: Glued Clamped  2 Brass 4 Galdwinized steel Concrete tile CASING JOINTS: Glued Clamped  2 Concrete Tile CASING JOINTS: Glued Clamped  3 Staniless steel 5 Fibreglass 10.05 ft. Dia in. to ft. Dia in. to ft.  2 Brass 4 Galdwinized steel Concrete tile CASING JOINTS: Glued Clamped  2 Concrete Tile Control of Concrete tile CASING JOINTS: Glued Clamped  3 Control of Control of Concrete tile CASING JOINTS: Glued Clamped  4 Control of JOINTS: Glued Clamped  5 CREEN-PERFORATION OF STEEL CONCRETE CASING JOINTS: Glued Clamped  5 CREEN-PERFORATION OF STEEL CONCRETE CASING JOINTS: Glued Clamped  6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 6 Joint ft. Direction ft. to ft. From	DD# Gt Address Dow# + 1000 SW Jackson							Datum: NAVD88								
3 LOCATE WELL'S LOCATON WITH AN X" IN SECTION BOX: N Pump text data: Well water was N N N N N N N N N N N N N N N N N N N	City 0	D	ata Colle	ction M	ethod: le	gal surve	У									
WITH AN "X" IN SECTION BOX:  NOTE THE PROPERTY OF THE PROPERTY	City, 5	TE WEIT	2C A DEPTH OF	COMPLE									1			
Depth(s) Groundwater Encountered   ft. 2 ft. 3 ft.							1	N / I N N / U								
Pump test data: Well water was finafter hours pumping gpm Well was chemical/bacteriological sample was ubmitted to Department? Yes No X : If yes, mo/day/yrs Sample was submitted water was water well Disinfected? Yes No X if yes, mo/day/yrs Sample was submitted water was water well Disinfected? Yes No X if yes, mo/day/yrs Sample was submitted water was water well Disinfected? Yes No X if yes, mo/day/yrs Sample was submitted water was water well Disinfected? Yes No X if yes, mo/day/yrs Sample was submitted water was water well Disinfected? Yes No X if yes, mo/day/yrs Sample was submitted water was water well Disinfected? Yes No X if yes, mo/day/yrs Sample was submitted water was	1		T D- 41(-) C	adarretes To-	nountered 1				ft. 2		ft.	3	ft.			
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WELL WATER TO BE USED As: 5 Public water supply 8 Air conditioning 17 Injection with 12 public water supply 8 public water supply 9 public water supply 8 public water supply 8 public water supply 9 public water supply	Est. Yield gpm: Well water was n. aner nours pumping gpm															
1 Domestic 3 Feed lot 6 Oil field water supply   2 Domestic 3 Feed lot 6 Oil field water supply   2 Irrigation 4 Industrial 7 Domestic (lawn & garden)   1 Domestic 6 Seepal   2 Domestic 6 Seepal																
Was a chemical/bacteriological sample submitted to Department? Yes   No X   If yes, mo/day/yrs   Sample was submitted   Mater Well Disnifected? Yes   No X   Sample was submitted   Water Well Disnifected? Yes   No X   No X   Sample was submitted   Water Well Disnifected? Yes   No X   No X   Sample was submitted   Water Well Disnifected? Yes   No X   No X   Sample was submitted   Water Well Disnifected? Yes   No X   No X   Sample was submitted   Water Well Disnifected? Yes   No X   No X   Sample was submitted   Water Well Disnifected? Yes   No X   No X   Sample was submitted   Water Well Disnifected? Yes   No X   Sample was submitted   Water Well Disnifected? Yes   No X   Sample was submitted   Welded   Clamped   Welded   Threaded   X   Threaded   X   Welded   Threaded   X   Welded   Threaded   X   Thr			1 Domestic 3	Feed lot	6 Oil field	l water su	ipply	7	9 Dewa	atering	12 O	ther (S)	pecify below)			
Simple was submitted water Well Disinfected? Yes No X   Sample was submitted water Well Disinfected? Yes No X   Sample was submitted water Well Disinfected? Yes No X   Sample was submitted water Well Disinfected? Yes No X   STYPE OF CASING USED: 5 Wrought Iron   8 Concrete tile CASING JOINTS: Glued Clamped   Welded   Other (Specify below)   Welded   Camped   Welded   Other (Specify below)   Welded   X   X   Welded   X   Welded   X   X   Welded   X   X   Welded   X   X   Welded   X   X   X   X   X   X   X   X   X		<del></del>	E 2 Irrigation 4	Industrial	7 Domest	ic (lawn	& ga	rden) (1	0)Moni	itoring we	ell					
Was a chemical/bacteriological sample submitted to Department: Fes	1 1 .															
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 RM (SR) 6 Asbestos-Cement 9 Other (specify below) Welded  2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in to 20.05 ft, Dia in to ft, Dia in to ft. Casing height below land surface 0.35 ft, Weight Ibs/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) 2 SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 5 Gauze wrapped 8 Saw Cut 10 Other (specify) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)  5 CREEN-PERFORATED INTERVALS: From 20.05 ft, to 35.05 ft. From ft. to ft. From ft. to 35.45 ft. From ft. to ft. GRAVEL PACK INTERVALS: From 18 ft. to 35.45 ft. From ft. to ft. Fro	F-sw	SW SE Was a harrisel/hostoriological sample submitted to Department? Ves No X: If ves. mo/day/vrs														
STYPE 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		Was a chemical bacteriological sample submitted to Dopardinent. Too 11, 22, 25, 25, 25, 25, 25, 25, 25, 25, 25														
Steel   3 RMF (SR)   6 Assessos-Cement   9 Other (specify octor)		S	Sample was su	omnied				·		710 101	TOO C1					
Steel   3 RMF (SR)   6 Assessos-Cement   9 Other (specify octor)	5 TYPE	OF CASIN	NG USED: 5	Wrought In	ron	8 Con	crete	tile	CASI	ING JOIN	VIS: Glue	ed	Clamped			
(2) PVC 4 ABS 7 Friberglass 1 in. to ft. Dia in. to ft. Dia in. to ft. Casing height below land surface 0.35 ft., Weight 1 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) 10 Asbestos-Cement 12 None used (open hole) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) 3 CREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot (3) Mill slot 5 Gauze wrapped 8 Saw Cut 10 Other (specify) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) 3 CREEN-PERFORATED INTERVALS: From 20.05 ft. to 35.05 ft. From ft. to f	1 1 Ste	el :	3  RMP(SR) = 6	Asbestos-C	_ement	9 Ouic	a (sp	occity oci	iow)		*** 01					
Blank casing diameter 2 in. to 20.05 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.35 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)  SCREEN-PERFORATED INTERVALS: From 20.05 ft. to 35.05 ft. From ft. to	Threaded										X					
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SCREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot	TYPE OF	SCREEN	JR PERFORATION	N IVIA I EKI.	A PVC	c	ΔR	S		11 Othe	er (specify	7)				
SCREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot	1 Ste	el 3 Stati	mess sieer 5 Fri	ocigiass	8 RM (S	R) 10	) Asl	bestos-Ce	ement	12 Non	e used (or	en hol	e)			
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SCREEN-PERFORATED INTERVALS: From 18 ft. to 53.5.05 ft. From ft. to ft. From f	1 Co	ortinuous slo	of 3 Mill slot	5 Gau	ize wrappe	d 7 To	orch	cut	9 Drille	ed holes	11 No	ne (ope	n hole)			
SCREEN-PERFORATED INTERVALS: From 18 ft. to 53.5.05 ft. From ft. to ft. From f	2 10	nivered shut	ter 4 Key punche	ed 6 Wir	e wrapped	8 Sa	w C	ut 1	0 Othe	r (specify	r)					
GRAVEL PACK INTERVALS: From 18 ft. to 35.45 ft. From ft. to ft	SCREEN.	PERFOR A	TED INTERVALS													
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GROUT MATERIAL: 1 Neat cement 2 Cement grout Grout Intervals From 1 ft. to 18 ft. From ft. to ft. To ft. The ft. T	CD.	ANTEL DAG	TEDWAT C.	From	18	ft to	;	35.45	ft. Fro	om	ft	. to	ft.			
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Grout Intervals From 1 ft. to 18 ft. From ft. to ft. From ft. From ft. to ft. From ft. From ft. to ft. From ft. to ft. From ft. From ft. From ft. to ft. From ft. From ft. to ft. From ft. From ft. From ft. From ft. From ft. ft. From ft. From ft. From ft. From ft. From ft. ft. From ft. From ft.	6 GROU	J <b>T MATE</b>	RIAL: 1 Neat cer	nent 2 Ce	ement grou	t (3.1Be	enton	nite (4	Other	Concret	e: U-1II					
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 2 Sewer lines 5 Cess pool 8 Sewage lagoon (1) Fuel storage 14 Abandoned water well below)  12 Fertilizer storage 15 Oil well/ gas well  Direction from well?  NE  FROM TO  LITHOLOGIC LOG FROM TO  PLUGGING INTERVALS  7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was () constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)  NET  This Water Well Record was completed on (mo/day/year)  Interval 10/24/13  This Water Well Record was completed on (mo/day/year)  This Water Well Record was completed on (mo/day/year)  Larsen & Associates, Inc.  To the Water Service of the correct answers. Send top three copies to Kansas Department of Heathand Environment, Bureau of Water,  To the Contractor's Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Heathand Environment, Bureau of Water,  To the Contractor's Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Heathand Environment, Bureau of Water,  To the Contractor's License No.  To the Contractor's License No.  To the Contractor's License No.  To the Contractor's Contractor's License No.  To the Contractor's License No.	Grout Inte	ervals Fr	om 1 ft. to	18 ft	. From		ft. t	0	ft.	From		ft. te	o ft.			
1 Septic tank 2 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well 15 Oil well/ gas wel	What is th	ne nearest so	ource of possible co	ntamination	1:											
2 Sewer lines 5 Cess pool 8 Sewage lagoon (11) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well Direction from well? NE How many feet? ~190ft  FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  0 35.45 Grass on top; Brown silty clay  Flushmount waiver from BOW  7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) construct, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 10/24/13 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 or (mo/day/tear) 11/15/13 by (signature)  INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Heaviend Environment, Bureau of Water, 18/15/196-5522. Send one to Water, Well CONNER and retain one for			4 Lateral li	ines 7 Pit p	rivy	10 Live	stoc	k pens	13 Inse	ecticide S	torage					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard  Direction from well? NE  FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  0 35.45 Grass on top; Brown silty clay  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) 10/24/13 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 the old and the state of my knowledge and belief. This Water Well Record was completed on the old and the state of my knowledge and belief. State of the best of my knowledge and belief. This Water Well Record was completed on the old and the state of my knowledge and belief. State of the contractor's License No. 757 This Water Well Record was completed on the old and the state of my knowledge and belief. State of the contractor's License No. 757 This Water Well Record was completed on the old and the state of my knowledge and belief. State of the contractor's License No. 757 This Water Well Record was completed on the old and the state of my knowledge and belief. State of the contractor's License No. 757 This Water Well Record was completed on the old and the state of my knowledge and belief. State of my knowledge and belief. This Water Well Record was completed on the old and the state of my knowledge. The old and the state of my knowledge and belief. The old and the state of my knowledge and belief. The old and the state of my knowledge and belief. The old and the state of my knowledge and belief. The old and the old and the state of my knowledge and belief. The old and the old and the state of my knowledge and belief. The old and the state of my knowledge and belief. The old and					age lagoon	(11) Fuel	stor	age	14 Aba	andoned v	water well	. 1	below)			
Direction from well? NE How many feet? ~190ft  FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  0 35.45 Grass on top; Brown silty clay  Flushmount waiver from BOW  7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Denstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)  Kansas Water Well Contractor's License No. 757 This Water Well Record was completed or (mo/day/ear) 11/15/13 under the business name of Larsen & Associates, Inc.  INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Headhand Environment, Bureau of Water, Control (100 CW) Valedgen St. Suite 420 Tropeka Kansas 66612-1367. Telephone 785-296-5522. Send one to Water Well Cowner and retain one for						12 Fert	ilize	r storage	15 Oil	well/ gas	well					
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  0 35.45 Grass on top; Brown silty clay  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) 10/24/13 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) 11/15/13 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 Heath and Environment, Bureau of Water, Contract of St. Visite 420, Topeka Kansas 66612-1367, Telephone 785-296-5522. Send one to Water, Well Owner and retain one for	5 Water Edit Sewer Intel 6 September 1-1															
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,  Tinstructions: Please fill in blanks or circle the co						-		то		DI IIC	CING IN	TERV	ΔΤς			
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