WATE	R WELL	RECORD	Form '	WWC-5	Div	ision of Wa	ter Reso	ources; App. No.	,		
County:]	WATER WELL: Brown	NW 1/4	SW 1/4 S	SW 1/4	Section Nu 28	ımber	Township Number	Range Number		
Distance a	ind direction	n from nearest town	or city street	address of v	well if G	lobal Posi Latitude:	tioning	System (decimal deg .67017º	rees, min. of 4 digits)		
located wi	located within city? 1686 First Avenue East, Horton, KS							Longitude: W 95.52500°			
	2 WATER WELL OWNER: KDOT RR#, St. Address, Box # : 700 SW Harrison St.							Elevation: RIM: 1091.92 TOC: 1091.70			
RR#, S	St. Address,	Box # : 700 SV	V Harrison St.			Datum:	abov	e mean sea level			
City, State, ZIP Code : Topeka, KS 66603 Data Collection Method: legal survey 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 20 ft.											
LOCA		J DEFINO	COMILEI	ED WELL	20	MW8		I L.			
	AN "X" II	N Depth(s) Group	ndwater Encou	untered 1		112 110	ft. 2	ft. 3	ft		
1	ION BOX:	WELL'S STA	TIC WATER	LEVEL	9.19 ft	below lan	nd surfa	ce measured on mo/o	lay/yr 5/14/09		
N Pump test data: Well water was ft. after hours pumping gpm											
		Est. Yield	gpm: V	Vell water v	vas	ft. a	after	hours pump	ing gpm		
NW NE WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well											
W 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (1) Monitoring well											
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs											
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs Sample was submitted Water Well Disinfected? Yes No X											
S Sample was submitted Water Well Disinfected? Yes No X 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped											
5 TYPE	OF CASIN	NG USED: 5	Wrought Iron	n 8	Concre	te tile	CAS.	ING JOINTS: Glued	Clamped		
1 Ste	1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded (2) PVC 4 ABS 7 Fiberglass Threaded X										
Blank cos	ina diameter	A ABS /	Fiberglass ft	Dia		n to	f+	Dia	to ft		
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 5 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.22 ft., Weight Ibs./ft. Wall thickness or gauge No.											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
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)											
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											
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 5 ft. to 20 ft. From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 4 ft. to 20 ft. From ft. to ft. From ft.											
SCREEN-	PERFORA	TED INTERVALS	From	5	ft. to	20	ft. Fro	o m ft. t	o ft.		
From ft. to ft. From ft. to ft.											
GRAVEL PACK INTERVALS: From 4 ft. to 20 ft. From ft. to								o ft.			
			From		It. to		II. Fro	om It. t	o II.		
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-2 ft. Grout Intervals From 2 ft. to 4 ft. From ft. to ft. From ft. to ft.											
Grout Intervals From 2 ft. to 4 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 2 Sewer lines 5 Cess pool 8 Sewage lagoon (1) 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? WNW How many feet? ~200											
FROM	TO	LITHO	LOGIC LOG		FROM	TO		PLUGGING INT	ERVALS		
0		Asphalt									
11		Silt, brown, with y		l, some							
4		clay, asphalt rubb Silty clay, dark br		ry fine		-					
		sand	own, some ve	J Y MAIC		1					
						-	Fluchn	nount waiver from I	BOW		
								LOWIN THE TOTAL			
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) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 6/17/09											
under the h	ter well Con	tractor's License No. e of Larsen & Asse	ociates. Inc.		er Well Re by (signat		Impleted	(Inio/day/year)	11/07		
INSTRUCT	TONS: Please	fill in blanks or circle th	ne correct answers	s. Send top th	ree copies t	o Kansas Der	partment	of Health and Environmen	t. Bureau of Water.		
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.											