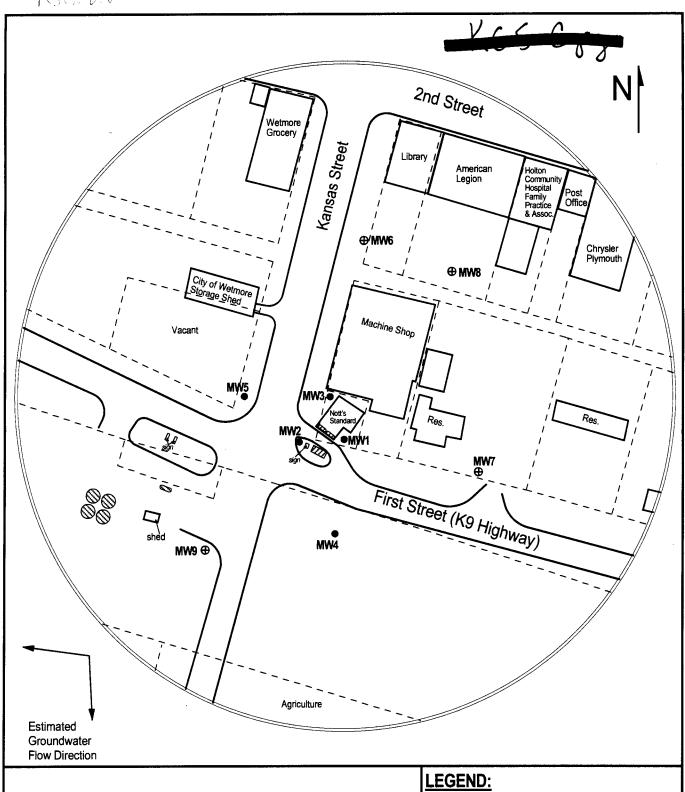
WAILK WELL	RECORD	Form wwc-	DIVI	sion of water Kes	ources; App. No.	
1 LOCATION OF County:	WATER WELL: Vemaha	Fraction NW 1/4 NE 1/4	SE ¼	Section Number 11	Township Number T 5 S	Range Number R 14 E
County: Nemaha NW ½ NE ½ SE ½ 11 T 5 S R 14 E  Distance and direction from nearest town or city street address of well if located within city? SW corner of 1st St. and Kansas St., Wetmore KS  Latitude:						
Longitude:						
2 WATER WELL OWNER: KDHE Elevation:						
RR#, St. Address, Box # : 1000 SW Jackson Blvd Datum: City. State. ZIP Code : Topeka KS 66612 Data Collection Method:						
City, State, ZIP C	ode : Topeka					
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 15.05 ft.						
LOCATON MW9						
WITH AN "X" I	N Depth(s) Groun	ndwater Encountered 1		ft. 2	ft. 3	ft.
SECTION BOX:	WELL'S STAT	TIC WATER LEVEL	ft.	below land surf	ace measured on mo/o	lav/vr
WITH AN "X" IN SECTION BOX:  N  Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. 3 ft. SECTION BOX:  WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr  Pump test data: Well water was ft. after hours pumping gpr						
Est. Yield gpm: Well water was ft. after hours pumping gpm						
		R TO BE USED AS: 5	Dublic was	ton summity 8 A	ir conditioning 11 I	niggpin
NW NE	WELL WATE	R TO BE USED AS. 3	rubiic wa	ler suppry on	in conditioning 11 in	njection wen
w	E Domestic 3	Feed lot 6 Oil field	water suppl	y 9 Dev	vatering 12 Off	ier (Specify below)
x 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/yrs						
S	Sample was sul	bmitted		Water V	Well Disinfected? Yes	No X
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped						
1 Steel	2 DMD (SD) 6	Asbestos-Cement	0 Other (s	necify below)	Welde	ad
Steel	4 ABS 7	Aspestos-Cement	9 Omer (s	pecify below)	W 5146	7U .11 = \$7
(2)PVC	4 ABS 7	ribergiass			i nrea	aea X
Blank casing diamete	r 2 in. to	Fiberglass 3.05 ft., Dia ft., Weight	ii	n. to tt	., Dia in	to ft.
Casing height below la	and surface	ft., Weight		lbs./ft. Wa	all 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)						
ISCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From 3.05 ft. to 15.05 ft. From ft. to ft.						
2 Louvered shutter 4 Key punched 6 wife wrapped 6 Saw Cut 10 Other (specify)						
SCREEN-PERFORA	TED INTERVALS:	riom 3.05	II. 10	15.05 IL. F.	rom n. t	οπ.
		From	It. to	π. κ.	rom ft. t	οπ.
GRAVEL PAC	CK INTERVALS:	From 2	ft. to	15.30 ft. F	rom tt. t	o ft.
		From	_ ft. to	ft. F	rom ft. t rom ft. t	o ft.
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1'						
Grout Intervals From 1 ft. to 2 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? NE How many feet? ~150'						
FROM TO	LITHOI	LOGIC LOG	FROM	TO	PLUGGING INTI	ERVALS
0 15.3	Grass on top; Brov	vn silty clay w/ gravel				
					***************************************	
			\			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, 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)  7/16/14						
Kansas Water Well Con					i or (mo day/year) 7	/16/14
under the business name			by (signatu			· ·
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 the o WATER WELL OWNER and retain one for						
Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send the 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.						
J - 21 1000140. 100 01 W3.00	vara sometaviva Well	at attipar it it it ituli				

NAROLIA





1311 E 25th St., Suite B Lawrence, KS 66046

(785) 841-8707 office (785) 865-4282 fax

## **PROJECT:**

Nott's Standard 1st & Kansas Ave Wetmore, KS

KDHE ID: U4-066-12294

Date: 3/4/14

100 ft

Approximate Location of Former UST Basin

Approximate Location of Active AST and Pump Island

- Approximate Location of Property Line

Monitoring Well

Mehnenligaweii (Installed 3/4/14)

NOTE: Approximate location of active and former product lines are unknown. NOTE: Monitoring wells have not been formerly surveyed by a liscensed sun. The top of casing elevation is based on an onsite benchmark.