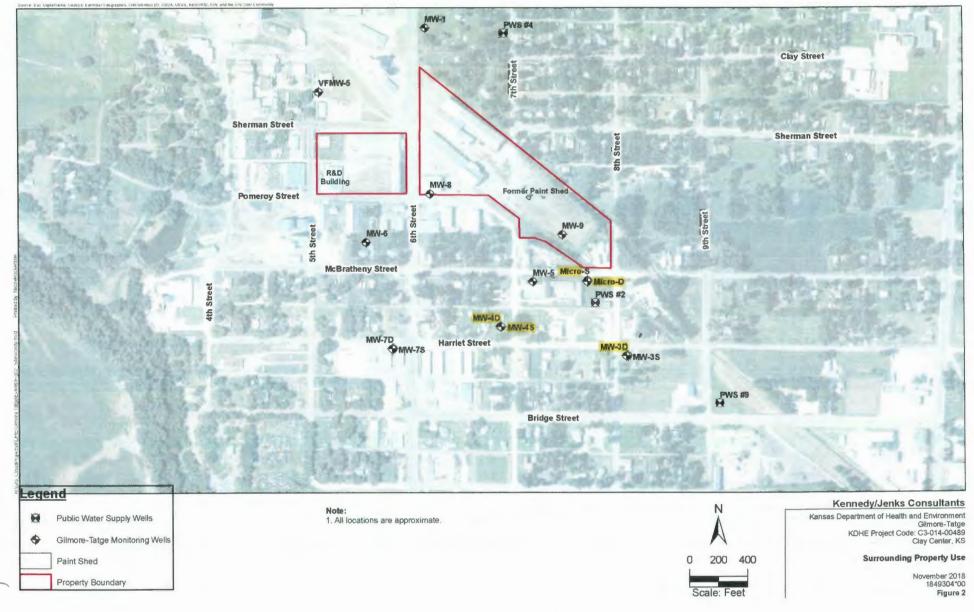
WATER WELL R		n WWC-5		sion of Water		MW-2S		
Original Record		inge in Well Use		arces App. No.		Well ID		
1 LOCATION OF WA	ATER WELL:	Fraction	Sect	ion Number	Township Numb	per Range Number		
County: Clay		NW 1/4 NW 1/4 NE 1		8	T 8 S	R 3 ■E□W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: KDHE direction from nearest town or intersection): If at owner's address, check here:								
Address: 1000 SW Jackson St; Ste. 410 S 8 to St. and Mc Brath ney St.								
Address: City: Topeka	State: KS	S ZIP: 66612	Clau Co	nter KS	7			
City: Topeka 3 LOCATE WELL			7	100	20 27 09	1		
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:ΥΥ π.					5 Latitude: 39.37097 (decimal degrees) Longitude: -97.12141 (decimal degrees)		
SECTION BOX:	Depth(s) Groundwater Encountered: 1)ft.				de: - 4.1.	(decimal degrees)		
N	2) ft. 3) ft., or 4) \square Dry Well				Horizontal Datum: WGS 84 NAD 83 NAD 27			
	WELL'S STATIC WATER LEVEL: ft. below land surface, measured on (mo-day-yr)					Source for Latitude/Longitude: GPS (unit make/model: Garmin etrek)		
	above land surface, measured on (mo-day-yr)				(WAAS enabled? X Yes \(\square\) No)			
NW NE	Pump test data: Wel		☐ Land Survey ☐ Topographic Map					
W E			Online Mapper:					
	Well water was ft.							
SW SE	after ho	urs pumping	. gpm	(Elamatia		D Connect Level D TOC		
	Estimated Yield:gpm Bore Hole Diameter:85 in. to			6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S	Bore Hole Diameter	:8.5 in. to30	ft. and			GPS Topographic Map		
mile	DE 11055	in. to	It.	1				
7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID								
1. Domestic:	5. ☐ Public	Water Supply: well ID cring: how many wells? .						
☐ Household ☐ Lawn & Garden			11. Test Hole: well ID					
Livestock					Geothermal: how many bores?			
2. Irrigation					a) Closed Loop			
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop Surface Discharge Inj. of Water			
4. Industrial	☐ Recove							
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:								
Water well disinfected? Yes No								
8 TYPE OF CASING USED: Steel PVC Other								
Casing diameter 2 in to 20 ft Diameter in to ft Diameter in to ft								
Casing diameter 2 in to 20 ft., Diameter in to ft. Diameter in to ft. Casing height above land surface 6 in Weight 16s/ft. Wall thickness or gauge No. sch 40								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From .20 ft. to .30 ft., From								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From ft. to ft., From ft. to ft. to ft.								
Nearest source of possible contamination: □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well								
Other (Specify)								
Direction from well?								
10 FROM TO		OGIC LOG	FROM	TO L	THO. LOG (cont.) o	r PLUGGING INTERVALS		
	lack silty clay							
	ght Brown silty clay							
25 30 Li	ght brown medium sand							
			Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged								
under my jurisdiction and was completed on (mo-day-year) 5/31/2019 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 710 This Water Well Record was completed on (no day-year) 06/26/2019								
under the business name of Below Ground Surface, Inc. Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,								
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015								



2