WATER WELL RECORD Form	n WWC-5	D	ivision of	f Water Res	ources: App. No.	
1 LOCATION OF WATER WELL: Fraction County: Douglas SE M Distance and direction from nearest town or city stre	GP.		Section	n Number	Township Number	Range Number
Distance and direction from pearest town or city street	SE ½	Well if	Clobal	25 Positionin	g System (decimal dea	R 19 E/W
located within city? 1501 6 <sup>th</sup> St., Lawrence, KS  Latitude: N 38.97333°						
Longitude: W 95.25210°						
2 WATER WELL OWNER: KDHE Elevation: 876.81 pin/ 876.35 toc						
RR#. St. Address, Box # : 1000 SW Jackson, Suite 400  Datum: above mean sea level  Datum: Address, Box # : Torolog WS (6612)						
City, State, ZIP Code : Topeka, KS 66612 Data Collection Method: legal survey						
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 13 ft.  LOCATON MW5						
WITH AN "X" IN Depth(s) Groundwater En	countered 1		141 44	ft 2	ft. 3	A .
WITH AN "X" IN Depth(s) Groundwater En SECTION BOX: WELL'S STATIC WATE	R LEVEL	8.65	ft belov	w land surf	ace measured on mo/o	av/vr 8/23/07
N Pump test data:	Well water	was	11. 0010	ft after	hours pump	ing onm
Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm						
NW NE WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well						
W   E   1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)   2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10) Monitoring well						
-sw-se-						
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs						
Sample was submitted						
5 TYPE 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						
2 PVC 4 ABS 7 Fiberglass Threaded X						
Blank casing diameter 2 in to 3	ft. Dia		in to	ft	. Dia in	to ft.
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 3 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.46 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)						
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 Guaze 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	ft. to	13	ft. F	rom ft.	to ft.
From		ft. to		ft. F	rom ft.	to ft.
From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 2 ft. to 13 ft. From ft. to ft.						
From		ft. to		ft. F	rom ft.	to ft.
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other cement, 0-1 ft.						
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 (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?	F	low ma	ny feet?			
FROM TO LITHOLOGIC LC	)G	FRO	M TO	0	PLUGGING INT	ERVALS
0 1.5 Topsoil fill						
1.5 3 Silty clay, fill, gray-brown, o		-	_			
3 11 Silty clay, brown, medium p						
increasing moisture with de 11 13.5 Clay, fat, wet, yellow-brown		-				
11 13.5 Clay, lat, wet, yellow-blown		-				
				Flush	mount 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) 8/23/07 and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No. 757	This Wa	ter Well	Record v	vas complet	on (me/day/vear)	9/6/07
under the business name of Larsen & Associates. In			ature)			
INSTRUCTIONS: Please fill in blanks or circle the correct ans	wers. Send top t	hree copie	s to Kansa	as Departmen	of Health and Environme	nt 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.						