

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL: County: <u>Sumner</u>	Fraction <u>SE ¼ SE ¼ SE ¼</u>	Section Number <u>18</u>	Township Number T <u>32</u> S	Range Number R <u>3</u> W
Distance and direction from nearest town or city street address of well if located within city? <u>NW corner of Main St. & Monroe St.</u>		Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>N 37.25658°</u> Longitude: <u>W 97.67410°</u> Elevation: <u>RIM: 1223.96; TOC: 1223.62</u> Datum: <u>WGS84</u> Data Collection Method: <u>legal survey</u>		
2 WATER WELL OWNER: KDHE RR#, St. Address, Box # : <u>1000 SW Jackson Blvd.</u> City, State, ZIP Code : <u>Topeka, KS 66612</u>				

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>34.57</u> ft.
	Depth(s) Groundwater Encountered1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <u>26.11</u> ft. below land surface measured on mo/day/yr <u>5/7/15</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) <u>10</u> Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u>

5 TYPE OF CASING USED:	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	Welded _____
<u>2</u> PVC	4 ABS	7 Fiberglass	Threaded _____ <u>X</u>
Blank casing diameter <u>2</u> in. to <u>19.57</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			
Casing height below land surface <u>0.34</u> ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless steel	5 Fiberglass	<u>7</u> PVC
2 Brass	4 Galvanized steel	6 Concrete tile	8 RM (SR)
9 ABS 11 Other (specify) _____			
10 Asbestos-Cement 12 None used (open hole) _____			
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot	<u>3</u> Mill slot	5 Gauze wrapped	7 Torch cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut
9 Drilled holes 11 None (open hole) _____			
10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From <u>19.57</u> ft. to <u>34.57</u> ft. From _____ ft. to _____ ft.			
From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <u>18</u> ft. to <u>34.90</u> ft. From _____ ft. to _____ ft.			
From _____ ft. to _____ ft. From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 <u>Bentonite</u>	4 <u>Other Concrete: 0-1'</u>
Grout Intervals From <u>1</u> ft. to <u>18</u> 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
2 Sewer lines	5 Cess pool	8 Sewage lagoon	<u>11</u> Fuel storage	14 Abandoned water well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	15 Oil well/ gas well
16 Other (specify below) _____				
Direction from well? <u>NW</u> How many feet? <u>~50'</u>				

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	8	Gravel on top; Brown silty clay			
8	15	Brown medium sandy clay			
15	20	Brown silty clay			
20	30	Brown medium sandy clay			
30	34.9	Gray medium sandy clay			

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) 5/5/15 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) 5/21/15 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 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>.

TRITERRA

LAND SERVICES

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**SURVEYING OF MONITORING WELLS
 ABANDONED TANK/FORMER STATION
 MILAN, KANSAS**

The above site, Abandoned Tank, is in Section 18, Township 32 South, Range 3 West of the Sixth Principal Meridian, Sumner County, Kansas. The Southeast corner of Section 18 was assigned coordinates of 00.00 North and 00.00 West.

The vertical control was an NGS benchmark (A 314 1956) described as a disk set vertically in the north brick wall of the school building, 2.1 feet west of the northeast corner and 2.8 feet above the ground. Elevation: 1224.68 feet. A control point was set as a chiseled 'X' at the southeast corner of the building on the Abandoned Tank site.

The Latitude and Longitude were recorded from a GPS unit. The site is located on the 7.5' quad map titled "Milan".

ID	NORTH	WEST	LATITUDE	LONGITUDE	ELEVATION
SE CORNER 18-32S-3W	00.00	00.00			
Control Point	70.66	59.33	37.25666	97.67429	1224.10
MW-1 SE SE SE SE	55.68	57.43	37.25663	97.67426	RIM 1223.91 TOC 1223.60
MW-2 SE SE SE SE	37.79	115.87	37.25657	97.67445	RIM 1223.77 TOC 1223.55
MW-3 SE SE SE SE	44.30	15.67	37.25658	97.67410	RIM 1223.96 TOC 1223.62
MW-4 SE SE SE SE	132.92	37.05	37.25682	97.67419	RIM 1223.56 TOC 1223.17
MW-5(Sec 19) NE NE NE NE	-68.94	42.80	37.25627	97.67420	RIM 1223.88 TOC 1223.42
MW-6(Sec 19) NE NE NE NE	-36.80	98.50	37.25636	97.67437	RIM 1223.84 TOC 1223.31
MW-7(Sec 20) NW NW NW NW	-78.36	-40.59	37.25624	97.67392	RIM 1224.11 TOC 1223.83
MW-8(Sec 19) NE NE NE NE	-109.41	114.23	37.25616	97.67444	RIM 1223.78 TOC 1223.28
MW-9(Sec 19) NE NE NE NE	-117.14	24.47	37.25615	97.67412	RIM 1223.25 TOC 1222.89



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JUN 01 2015
BUREAU OF WATER