CITY of SPRINGFIELD

Public Works Department

Surveillance Enforcement and Billing
Sewer Maintenance
1216 W. Nichols
Springfield, MO 65802

Phone: 417/864-1923
Fax: 417/864-1918

Date: 4-26-02 Fax #: 1-573-368-2111

To: MDNR / DGLS

From: Gene Pabst

Message: Water Tracing Information

Pages to follow: 3

FOR OFFICE USE ONLY	
INJECTION POINT #	DATE RECEIVED
CHECKED BY	DATE
PLOTTED BY	DATE

MISSOURI DEPARTMENT OF NATURAL RESOURCES
DIVISION OF GEOLOGY AND LAND SURVEY, GEOLOGICAL SURVEY PROGRAM

WATER TRACE INFORMATION SHEET
INJECTION POINT

JECTION POINT LOCATION

ECTION POINT DESCRIPTION: 411 N. Sherman Spfld, MO (Building Sanitary Sewer)
COUNTY: Greene

¼ SECTION	¼ ¼ SECTION	¼ ¼ ¼ SECTION	SECTION	TOWNSHIP	RANGE	QUADRANGLE NAME
		SE ¼	13	29 N.	22 E/W	

ITTEN LOCATION IF LEGAL DESCRIPTION IS UNAVAILABLE:
PURPOSE OF TRACE:
ELEVATION IN FEET:

'E OF INJECTION POINT
SEPTIC TANK ☐ WELL ☐ LAKE/POND ☐ SINKHOLE ☒ SEWER ☐ LAGOON ☐ STREAM ☐ OTHER Clean Out

OPERTY OWNER'S NAME: City of Springfield
TELEPHONE: 417-864-1923
DRESS: 1216 W. Nichols
CITY: Springfield
STATE: MO
ZIP CODE: 65802

EGISTRANT'S INFORMATION

GISTRANT'S NAME AND COMPANY: City of Springfield - Wastewater Operations
TELEPHONE: 417-864-1923
GISTRANT'S ADDRESS: 1216 W. Nichols
CITY: Springfield
STATE: MO
ZIP CODE: 65802

JECTION INFORMATION

	PROPOSED	ACTUAL
ECTION DATE 4-29-02	☐	☒
ACER INJECTED Fluorescein	☐	☒
ACER AMOUNT 2 gal	☐	☒

INJECTION TIME 10:50 A.M./P.M.
NUMBER OF MONITORING POINTS 1

OW CONDITIONS AT INJECTION

Checking to see if building is connected to the sanitary sewer.

DYE 4-29-02
10:50 AM ½ GAL.
11:00 AM ½ GAL.
11:20 AM ¼ GAL.
11:30 AM ¼ GAL.
12:30 PM ½ Gal.
2 gal

ALL TO MAIN today.

.EASE INCLUDE A SKETCH MAP WITH THIS FORM!

sketch map or photocopy of topographic map should contain the following: injectio
ves, mines, and roads. Include a scale and north arrow on the sketch map.

MMENTS

City of Springfield recently acquire
we were trying to determine if
connected to the sanitary sewe

HEREBY CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE AND COM

EGISTRANT'S SIGNATURE: Eugene D. Pabst
4-30-02

780-1693 (12-98)

MAIL COMPLETED COPY TO: DEPARTMENT OF NATURAL RESOURCES, ENVIRONMENTAL GEOLOGY SECTION, P.O. BOX 250, ROLLA, MO 65402-0250
PHONE: (573) 368-2161 FAX: (573) 368-2111 E-MAIL ADDRESS: gspeg@mail.dnr.state.mo.us

411 N. Sherman

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MONITORING POINT #	DATE RECEIVED
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DIVISION OF GEOLOGY AND LAND SURVEY, GEOLOGICAL SURVEY PROGRAM

WATER TRACE INFORMATION SHEET
MONITORING POINT

MONITORING POINT LOCATION

MONITORING POINT DESCRIPTION	COUNTY
Sanitary Sewer below 411 N. Sherman	Greene

¼ ¼ ¼ SECTION	¼ ¼ SECTION	¼ SECTION	SECTION	TOWNSHIP	RANGE	QUADRANGLE NAME
		SE 1/4	13	29 N.	22 E/W	

WRITTEN LOCATION IF LEGAL DESCRIPTION IS UNAVAILABLE	LATITUDE	LONGITUDE

ACCESS DESCRIPTION	PURPOSE OF TRACE	ELEVATION IN FEET

TYPE OF MONITORING POINT

☐ SEPTIC TANK ☐ WELL ☐ LAKE/POND ☐ SINKHOLE ☒ SEWER ☐ LAGOON ☐ STREAM ☐ OTHER

BACKGROUND FLOW CONDITIONS

PROPERTY OWNER'S NAME	TELEPHONE
City of Springfield	417-864-1923

OWNER'S ADDRESS	CITY	STATE	ZIP CODE
1216 W. Nichols	Springfield	MO	65802

REGISTRANT'S INFORMATION

REGISTRANT'S NAME AND COMPANY	TELEPHONE
City of Springfield	

REGISTRANT'S ADDRESS	CITY	STATE	ZIP CODE
1216 W. Nichols	Springfield	MO	65802

INJECTION INFORMATION

SAMPLE NUMBER	SAMPLER PLACEMENT DATE	SAMPLER PLACEMENT TIME	SAMPLER RECOVERY DATE	SAMPLER RECOVERY TIME	COLLECTED BY	ANALYZED BY	FLUORESCEIN QUANTITY WATER	FLUORESCEIN QUANTITY CARBON	RHODAMINE WT QUANTITY WATER	RHODAMINE WT QUANTITY CARBON	EOSINE QUANTITY WATER	EOSINE QUANTITY CARBON	TINOPAL CBS-X QUANTITY WATER	TINOPAL CBS-X QUANTITY COTTON	TINOPAL CBS-X QUANTITY ELUTED	ANALYSIS METHOD/ FLOW CONDITIONS/ REMARKS
Sanitary Sewer	4/29/02	10:50 A.M.	4/29/02	11:05 A.M.	Fluorescein dye observed in the Sanitary Sewer.											

ANALYSIS METHODS: S = SPECTROFLUOROMETER F = FLUOROMETER V = VISUAL O = OTHER
FLOW CONDITIONS: D = DRY P = POOL L = LOW FLOW H = HIGH FLOW N = NORMAL FLOW

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

REGISTRANT'S SIGNATURE	REGISTRATION NUMBER	DATE
Eugene D. Pabst		4-30-02

MO 780-1694 (12-98)

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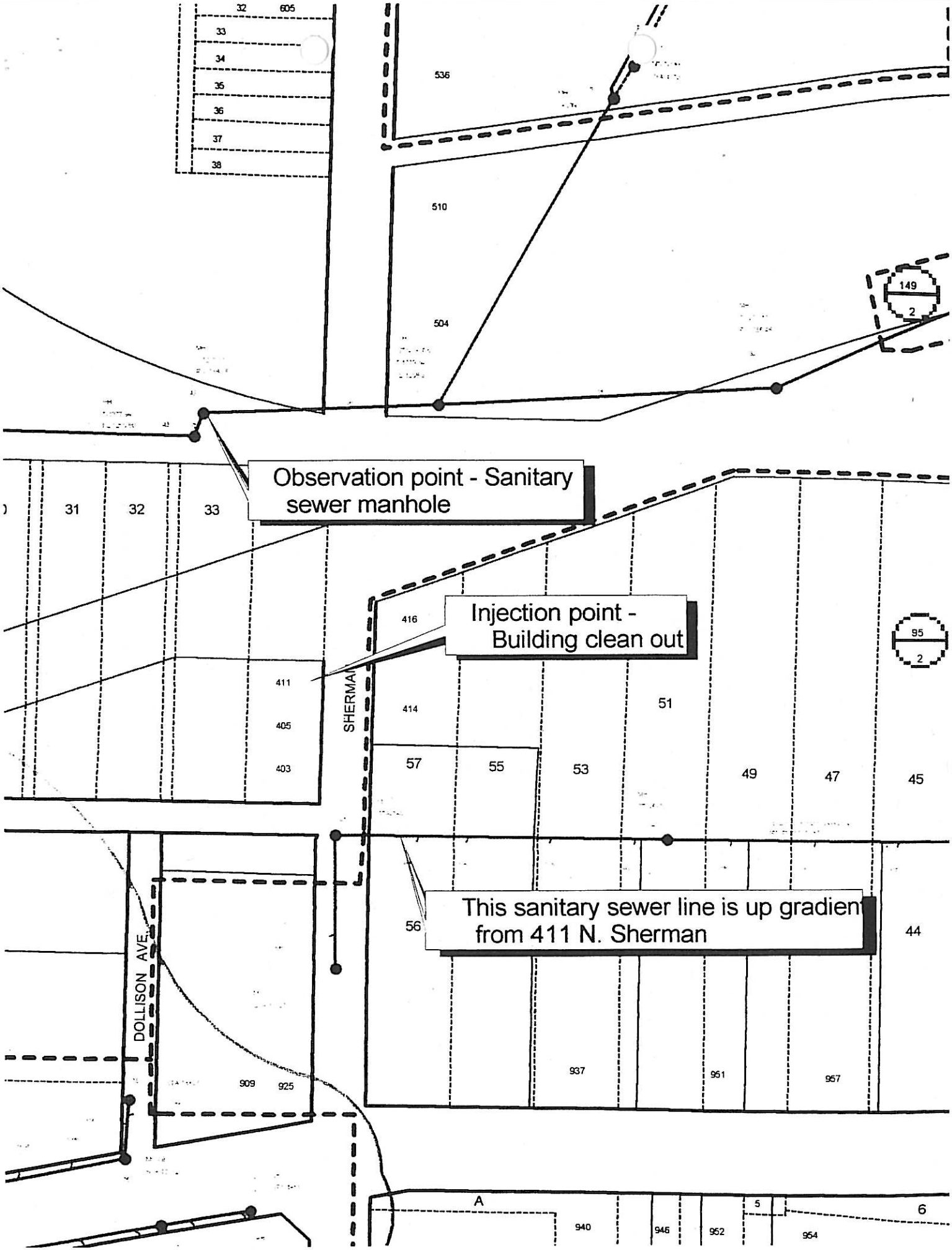
Observation point - Sanitary sewer manhole
Injection point - Building clean out
This sanitary sewer line is up gradient from 411 N. Sherman
SHERMAN
DOLLISON AVE.
32
605
33
34
35
36
37
38
536
510
504
149
2
31
32
33
416
411
405
403
414
51
95
2
57
55
53
49
47
45
56
44
937
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A
940
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	PROPOSED	ACTUAL
ECTION DATE 4-29-02	☐	☒
ACER INJECTED Fluorescein	☐	☒
ACER AMOUNT 2 gal	☐	☒

INJECTION TIME 10:50 A.M./P.M.
NUMBER OF MONITORING POINTS 1

OW CONDITIONS AT INJECTION

Checking to see if building is connected to the sanitary sewer.

LEASE INCLUDE A SKETCH MAP WITH THIS FORM!

sketch map or photocopy of topographic map should contain the following: injection point, monitoring points, all known springs, sinkholes, ves, mines, and roads. Include a scale and north arrow on the sketch map.

MMENTS

City of Springfield recently acquired this building and we were trying to determine if the building was connected to the sanitary sewer.

HEREBY CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

EGISTRANT'S SIGNATURE	REGISTRATION NUMBER	DATE
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BACKGROUND FLOW CONDITIONS

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City of Springfield	417-864-1923

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1216 W. Nichols	Springfield	MO	65802

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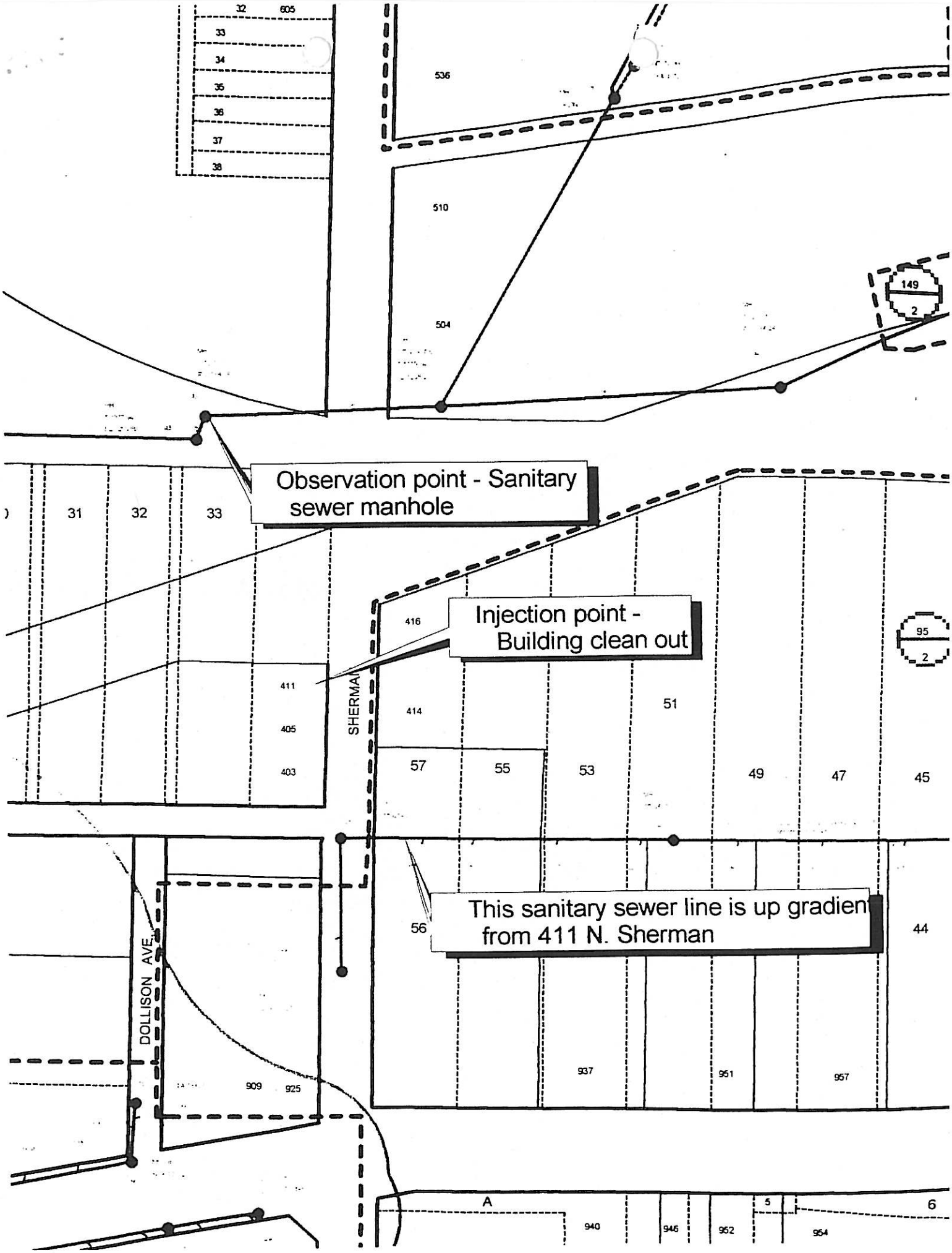
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405
403
414
57
55
53
51
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47
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95
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56
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909
925
937
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957
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940
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952
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