WATER WELL F	ECORD	Forn	n WWC-	5 1		n of Water				
1 TOCHTON OF Y	AARDED XXIET X .	Enaction			Sec	tion Num	ber	Townshi	p Number	Range Number
County: Sharmon OF W Distance and direction	from nearest town	SE ¼	et address o	f well if	Glob	al Positio	oning S	System (	decimal degr	rees, min. of 4 digits)
located within city? 59:	37 NW 17 <sup>th</sup> St., To	oeka KS 60	6618	1 44011 11	Lat	ituae:				
-										
2 WATER WELL O	WNER: Meier	Frucking				vation: _ tum:				
RR#, St. Address, E City, State, ZIP Cod	lox # : 5937 N	W 17" St. WS 66618					tion Me	ethod: le	gal survey	
3 LOCATE WELL'	S 4 DEPTH OF	COMPLI	ETED WEI	J. 47	154	ta concer	1011 1112	ft.	8	
LOCATON				p	iezom	eter Wel	ll			
WITH AN "X" IN										ft.
SECTION BOX:	ECTION BOX:  N  WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr  Pump test data: Well water was ft. after hours pumping								lay/yr	
N	Pumn	test data:	Well water	r was		ft. af	ter	ľ	iours pumpi	ıng gpin
	Est Yield	gnm:	Well water	r was		ft. af	ter	r	iours pump:	ıng gpın
NW - NE -	1	TO BE U	JSED AS: 5	5 Public	water	supply	8 Air	conditio:	ning II ii 12 Oth	njecuon wen ver (Specify below)
w - X	E Domestic 3 2 Irrigation 4	Feed lot	6 Oil field	water st	ippiy	den) (10)	Dewai Monit	oring we	12 Om 41	ner (Specify below)
	2 Imgauon 4	mousurar	/ Domesu	C (lawii	cc gare	ucii) (to	)1V101111	ornig we		
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs										
S	Sample was sul	mitted	- <del>0</del> 1			Wa	ater We	ll Disinf	ected? Yes	No X
5 TYPE OF CASIN	C USED: 5	Wrought I	ron	8 Con	crete t	ile	CASI	NG JOIN	ITS: Glued	Clamped
1 Ctool 2	DMD(CD) 6	A chectoe	Cement	9 Othe	er (sne	cify belo	w)		Welde	ed
2) PVC 4	ABS 7	Fiberglass	3		` *		· 		Threa	ded <b>X</b>
Blank casing diameter	2 in. to	32	ft., Dia		in.	to	ft., l	Dia	in	. to ft
Casing height above lan	d surface 4	ft., V	Weight			lbs./ft	. Wall	thicknes	ss or gauge	No.
PVC 4 ABS 7 Fiberglass Threaded X  Blank casing diameter 2 in. to 32 ft., Dia in. to ft., Dia in. to ft.  Casing height above land surface 4 ft., Weight Ibs./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) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)										
ACCREENT OR DEDECT ATION ODENINGS ARE										
1 Continuous slot	Mill slot	5 Ga	uze wrappe	d 7 T	orch c	ut 9	Drille	d holes	11 None	e (open hole)
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From 32 ft. to 47 ft. From ft. to ft. From ft. From ft. From ft. To ft. From ft. Fr										
SCREEN-PERFORAT	ED INTERVALS	From	34	ft to			ft. Fro	m	ft.	to ft
GRAVEI PAC	K INTERVALS.	From	26	ft. to		43	ft. Fro	om	ft.	to ft
GICAVELTAC.	K HVI LIKVI LLD.	From	<b></b>	ft. to			ft. Fro	m	ft.	to ft
6 CDOUT MATER	IAI · 1 Neat cen	nent 2 C	ement grout	t (3) B	entoni	te (	Other	Concre	te: 0-2 ft	
Grout Intervals From	om 2 ft. to	26 f	t. From		ft. to	1	ft.	From		ft. to ft.
What is the nearest so	arce of possible con	ntamination	n:					-		
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify										
2 Sewer lines	5 Cess poo		age lagoon	11 Fue	l stora				water well	below)
3 Watertight sewe	r lines 6 Seepage	pit 9 Feed	dyard	How m		storage 1	15 011 7	wen/ gas	wen	
Direction from well?				-				DITIO	CTNC INT	TDN/ATC
FROM TO		LOGIC LO	)G	FRO	JM	TO		PLUC	GING INT	LINVALO
	Fill, asphalt, rock Brown silty clay				-+					
	Coarse sand									
E COMPLACEOUS	OD LANDOWN	TDIC OF	DTIDIC AT	TON: T	hie we	ter well we	as (1)	angtructed	(2) reconst	ructed, or (3) phage
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, 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) 7/12/11										
Kansas Water Well Cont	ractor's License No.	757_	. This V	Water We	ll Reco	ord was ¢o	mpleted	i on (mo/	day/year)	7/12/11
lunder the business name	of Larsen & Ass	ociates, In	ic.	by (si	gnatur	e)				
INSTRUCTIONS: Please	fill in blanks or circle t	he correct ans	swers. Send to	op three co	pies to l	Kansas Dep 5-296-5522	partment Send or	of Health : ne to WAT	and Environme ER WELL O'	ent, Bureau of Water, WNER and retain one fo
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.										