WATER WE	LL RECORD Form WW	<b>'C-5</b> D					
County:	OF WATER WELL: Fraction Wyandotte SW 4 NW 5	и <b>N</b> E 14	32	T I	1 s	Range Number R 23 Ew	
Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits) located within city?  Latitude: N 39° 03' 22.8"							
205 Front Street, Bonner Springs, KS  Longitude: N 39 03 22.8  Longitude: W 09 52 50.3" 940  Elevation: 801 42 PIN: 801 00 TOC							
	LL OWNER: Bruce Coleman		Elevation:	801.42 PIN; 80	1.00 TOC		
DD# G. 4.11	7 11 707 156		Datum:	001.421111, 00	1.00 100		
City, State, ZI	ess, Box # : PO Box 456 P Code : Bonner Springs, KS 66012	2		ion Method: le	gal survey		
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 22 ft.							
LOCATON			MW4R				
WITH AN "	(" IN Depth(s) Groundwater Encountered	ed I	f	7 2	ft. 3	fr	
SECTION BO	WELL'S STATIC WATER LEVE	FI. Dry	ft helow land	surface measure	ed on mo/ds	v/vr 11/21/04	
2.121/00							
Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm							
X N		valer was	It. a1	O Air andition	ours pumpir	gpm	
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
W 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							
S Sample was submitted Water Well Disinfected? Yes No X							
5 TYPE OF CA	SING USED: 5 Wrought Iron	8 Conc	ete tile	CASING JOIN	ΓS: Glued	Clamped	
1 Steel	3 RMP (SR) 6 Asbestos-Cement	9 Other	(specify below	w)	Welded		
(2) PVC	4 ABS 7 Fiberglass		(opening control		Thread	ed <b>X</b>	
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 12 ft., Dia in. to ft., Dia in. to ft.  Casing height below land surface 0.42 ft., Weight lbs./ft. Wall thickness or gauge No.							
Cosing baisht below land surface 0.42 ft Weight the /A Well this land as a second N							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
I Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify)							
I 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 12 ft. to 22 ft. From ft. to ft.							
2 Louvered shutter * Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)							
SCREEN-PERFORATED INTERVALS: From 12 ft. to 22 ft. From ft. to ft. From ft. to ft.							
	From	ft. to	f	t. From	ft. to	ft.	
GRAVEL	PACK INTERVALS: From 10	ft. to	22 f	t. From	ft. to	ft.	
From ft. to ft. From ft. to ft.							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other concrete, 0-3 ft Grout Intervals From 3 ft. to 10 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 (1) 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? How many feet?							
FROM TO	LITHOLOGIC LOG	FROM		DILICC	ING INTE	DYATC	
0 0.5°		FROI	1 10	FLUGG	TIAG TIATE	(VAL)	
0.5' 6'	Asphalt Sand, red/tan, very fine, no odor, dry	v					
0.5	Silty sand, brown, very fine grained,						
6' 11'	plasticity, moist, no odor	.0	1				
	Sand, tan, very fine grained, no odor	·,					
11' 19.5							
19.5' 22'	Gravel, red, wet, no odor						
			Fl	ushmount waiv	er by D. Ta	aylor	
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) 11/21/06 and this record is true to the best of my knowledge and belief.							
under my jurisdiction	n and was completed on (mo/day/year) 11/21 Contractor's License No. 757 This	1/U0	and this rec	ord is true to the	vest of my kn	owleage and belief.	
	contractor's License No/5/ This name of Larsen & Associates, Inc.	s water well by (sign		picted of (interday	/year)12/	11/00	
				mentlof Haalth and	Environ	Oursey of West	
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 \$	your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.						