		RECORD	WC-5	Division of Water Resources; App. No.						
		WATER WELL:	Fraction NE '/ SI	F IZ NIE IZ	Section N				Range Number R 25 E	
Distance a	and direction	from nearest town	or city street add	Global Po	sitioning	System (c	decimal depr	rees min of 4 digits)		
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? 1st & Garfield Latitude: N 39.12628°										
Kansas City, KS Longitude: W 94.61386°										
2 WATER WELL OWNER: Unified Gov't of WyCo/KCK										
RR#, St. Address, Box # : 701 North 7 th Street City, State, ZIP Code : Kansas City, KS 66101					Datum: above mean sea level Data Collection Method: legal survey					
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 20 ft.										
LOCATON MW9										
1	I AN "X" I	N Denth(s) Groun	dwater Encount	ered 1				ft 3	A	
1	ION BOX:	WELL'S STAT	TIC WATER LE	VEL 855	ft below b	and surfa	ace measure	ed on mo/d	ft. ay/yr 9/7/0 7	
	N	Pumr	test data: Wel	l water was	fi. bolow i	after	he	nurs numni	ng gnm	
N 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 1 1	1 Domestic 2 Food let 6 Oil field water avenly 0 Dovertowing 12 Other (Specify below									
W E Domestic 3 Feed for 6 On field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10)Monitoring well										
	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 CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped										
1 St/	el .	RMP(SR) 6	A sheetos-Cemer	nt 9 Othe	r (snecify h	elow)		Welde	d	
(2)PV	/C	4 ABS 7	Fiberglass		- (- F)	,		Thread	led X	
Blank cas	ing diamete	r 2 in. to	10 ft., Di	a	in. to	ft	, Dia	in.	to ft.	
PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 10 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)										
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)										
SCREEN 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)										
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 10 ft. to 20 ft. From ft. to ft.										
			From	ft. to		ft. Fr	om	ft. to	ft.	
GR	LAVEL PAG	CK INTERVALS:	From	9 ft. to	21	ft. Fr	om	ft. to	ft.	
			From	ft. to		ft. Fr	om	ft. to	ft.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other concrete, 0-1.5 Grout Intervals From 1.5 ft. to 9 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										
	ver lines	5 Cess pool		goon (11) Fuel			andoned wa		below)	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well										
Direction from well? NE How many feet? ~180										
FROM	TO		LOGIC LOG	FRC	M TO		PLUGO	ING INTE	ERVALS	
0	0.5	Asphalt cover								
7	7 9	Silty-clay, dark gr Shale-clay, gray, n								
9	21	Clay, olive, fat, mo		13'		 -			******	
		Ciay, onvo, rad, inc	abu bataratea a	. 10		+				
						100 1		-	OW	
						Flushr	nount wai	ver from B	OW	
7 CONT	RACTOR'	S OR LANDOWN	ER'S CERTIFI	CATION: Th	is water well	was (1)	onstructed ((2) reconstru	cted or (3) phigged	
under my j	urisdiction as	nd was completed on (mo/day/year)	9/6/07	and thi	s record is	s true to the	best of my k	nowledge and belief.	
Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year) 9/26/07										
under the business name of Larsen & Associates, Inc. by (signature)										
INSTRUCT	TIONS: Please	fill in blanks or circle th	e correct answers. S	end top three cop	es to Kansas I	Department	of Health and	Environment	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.										
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