WATER WELL RECORD		Form WWC-5		Division of Water Resources: App. No.					
		WATER WELL:			Section Nu	mber Town	ship Number	Range Number	
County:	and direction	n from nearest town	NE 1/4 NE 1/4	NE 4	Clobal Posi	T T	19 S	R 11 E	
County: Lyon NE 1/2 NE 1/2 NE 1/2 16 T 19 S R 11 E 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? 701 W. 6th, Emporia, KS Latitude: N 38.40485°									
Longitude: W 96.18955°									
2 WATER WELL OWNER: Sunset Equities, Inc. (Wendy's)					Elevation: RIM: 1147.09 TOC: 1146.72				
RR#, St. Address, Box # : 1321 E. 1st, PO Box 1283 City. State, ZIP Code : McPherson, KS 67460					Datum: above mean sea level Data Collection Method: legal survey				
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 35 ft.									
	ATON		COMIT ELETED W	<u></u>	MW3	10.	•		
1	I AN "X" I		ndwater Encountered	11		ft. 2	ft. 3	ft.	
SECT	ION BOX:	WELL'S STAT	ΓIC WATER LEVE	L 33.10	ft. below lan	id surface mea	sured on mo/d	ay/yr 12/2/08	
	N	Pump	test data: Well wa	ater was	ft. a	after	hours pumpi	ng gpm	
NW NE 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 shamical/hasterial agian l sample submitted to Department? Very No. No. V. If was markle to									
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/y. Sample was submitted Water Well Disinfected? Yes No X									
5 TEVEN		NG LICED. 5	W	0. 0		CASTNO IO	Direction: 1 cs	NO.A	
5 1 YPE	OF CASI	NG USED: 5	A shortes Coment	8 Conc	rete tile	CASING JO	IN 18: Glued	Clamped	
(2) PX	5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglags								
Blank cas	ing diamete	r 2 in to	20 ft Dia		in to	ft Dia	in	to f	
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 20 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.37 ft., Weight lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL:									
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)									
1 Continuous slot (3) Mill slot 5 Gauze 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 20 ft. to 35 ft. From ft. to ft.									
SCREEN-PERFORATED INTERVALS: From 20 ft. to 35 ft. From ft. to ft.									
From ft. to ft. From ft. to f									
GRAVEL PACK INTERVALS: From 18 ft. to 35 ft. From ft. to)ft.	
GRAVEL PACK INTERVALS: From ft. to ft. to ft. From ft. ft. ft. From ft. ft. From ft. ft. ft. From ft. ft. ft. From ft. ft. ft. From ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-2 ft. Grout Intervals From 2 ft. to 18 ft. From ft. to ft. From ft. to ft.									
Grout Intervals From 2 ft. to 18 ft. From ft. to ft. From ft. to ft.									
What is the nearest source of possible contamination:									
	ver lines	5 Cess pool				14 Abandoned		16 Other (specify below)	
1		er lines 6 Seepage p				15 Oil well/ ga		0C10W)	
	from well?		· · · · · · · · · · · · · · · · · · ·		ny feet? ~30		•		
FROM	TO	LITHOI	OGIC LOG	FRO	M TO	PLU	IGGING INTE	RVALS	
0	1	Concrete					GOING IIVIE	ACTIES .	
1	7		brown, moderate plasti	city,					
7	33	moist Class of the second by							
	33	plasticity, moist	rown, mottled gray, hig	gh					
33	35	Clay, tan, wet							
						riushmount v	vaiver from B	OW	
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) Kansas Water Well Contractor's License No									
						mpleted orl (mo	/day/year) 1/	15/09	
i		of Larsen & Asso		by (sign				<u> </u>	
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 on 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.									