			Form WWC-5	Divis	sion of Wa	ter Reso	urces: App. No.		
1 LOCA County:	ATION OF Se	WATER WELL: edgwick	Fraction SW ¼ SE ¼	SE ¼	ection Nu 11	ımber	Township Number T 26 S	er Range Number R 1 E	
County: Sedgwick SW ½ SE ½ SE ½ 11 T 26 S R 1 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? 4604 E. 61 st Street Kechi, KS 67067 Latitude: N 37.79601° Longitude: W 97.28347°									
2 WATI	OWNED. KDHE	BED	F	Elevation: RIM: 1393.67, TOC: 1393.44					
RR#, St. Address, Box # : 1000 SW Jackson					Datum: above mean sea level				
City, S	state, ZIP Co	ode : Topeka	, KS 66612		Data Colle			ey	
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 23 ft.									
LOCA					MW9				
1	I AN "X" II	N Depth(s) Groun	ndwater Encountered 1			ft. 2	ft.	3 ft.	
SECT	ION BOX:		TIC WATER LEVEL						
	N Pump test data: Well water was ft. after hours pumping g								
	Est. Yield gpm: Well water was ft. after hours pumping gp								
-NM	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below								
W E Domestic 3 Feed for 6 Off 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/yr									
Sample was submitted Was a chemical bacter folgotal sample submitted to Department: Tes 140 X, if yes, indicately yes No X									
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped									
5 TYPE	OF CASIN	G USED: 5	Wrought fron	O Other (a)	tile :6: bal	CASI	ING JOINTS: GIU	ed Clamped	
1 Ste	1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded								
PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 13 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.23 ft., Weight Ibs./ft. Wall thickness or gauge No.									
Diank casing diameter 2 in. to 13 it., Dia in. to it., Dia in., Dia in., Dia i									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify)									
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)									
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 13 ft. to 23 ft. From ft. to ft.									
SCREEN-PERFORATED INTERVALS: From 13 ft. to 23 ft. From ft. to ft.									
0010211	. 214 0141		From	ft. to		ft. Fro	om f	t. to ft.	
From ft. to ft. From ft. to GRAVEL PACK INTERVALS: From 12 ft. to 23 ft. From ft. to From ft. to ft. From ft. to								t. to ft.	
	,		From	ft. to		ft. Fro	om f	t. to ft.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other concrete, 0-2'									
Grout Intervals From 2 ft. to 12 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?	NE		How many	feet? ~35	5			
FROM	TO	LITHO	LOGIC LOG	FROM	TO		PLUGGING IN		
0		Topsoil, dark brov						etroleum odor noted	
3			wn, moist, stiff, no			when p	oouring sand dow	n borehole	
8		petroleum odor Silty-clay red-bro	wn, moist, stiff, no	+			11 17 71 75 144		
- 0		petroleum odor	wii, moist, still, no	 					
15		Silty-clay, fine to r	nedium sand, red-						
		brown, wet, stiff, r	o petroleum odor						
18			ith highly weathered			El.		- POW	
23		shale, moist, no pe Total depth	troleum odor	-		riushn	nount waiver fron	II BUW	
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) 3/5/08 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year) 3/19/08									
under the business name of Larsen & Associates, Inc. by (signature)									
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									
vour records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.									