			Form WWC-5			er Resources: App			
1 LOCA	TION OF	WATER WELL:	Fraction	Se	ection Nur	nber Townsh	p Number	Range Number	
County: Sedgwick NW 1/4 SW 1/4 NW 1/4 31 T 2/6 S R 2 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? 3520 N Woodlawn, Wichita Latitude: N 37.74758° Longitude: W 97.26151°									
2 WATE	R WELL	OWNER: J&J De	evelonments	E	Elevation: RIM 1362.25, TOC 1361.78				
RR#, St. Address, Box # : 3512 SW Fairlawn, Suite 400					Datum: above mean sea level				
City, State, ZIP Code : Topeka, KS 66614-3981					Data Collection Method: legal survey				
RR#, St. Address, Box # : 3512 SW Fairlawn, Suite 400 City, State, ZIP Code : Topeka, KS 66614-3981 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 19.5 ft. LOCATON MW2									
LOCA	TON				MW2				
WIID	ANA	A Deptil(s) Ground	awater Encountered			11. 2	11. 5	11.	
SECTI	ON BOX:		IC WATER LEVEL						
	N Pump test data: Well water was ft. after hours pumping gr								
Est. Yield gpm: Well water was ft. after hours pumping gpm									
X NW	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well								
W Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below								er (Specify below)	
	2 Irrigation 4 Industrial / Domestic (lawn & garden) (10)Monitoring well								
-sw	-swse								
	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									
5 TYPE	OF CASI	NG USED: 5	Wrought Iron 8	Concrete	tile	CASING JOIN	ITS: Glued	Clamped	
1 Ste	el	3 RMP (SR) 6	Asbestos-Cement 9	Other (sp	ecify belo	ow)	Welde	;d	
PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 4.5 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.47 ft., Weight lbs./ft. Wall thickness or gauge No.									
Blank casing diameter 2 in. to 4.5 ft., Dia in. to ft., Dia in. to ft.									
Casing height below land surface 0.47 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) 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)									
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Guaze wrapped 7 Torch cut 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 4.5 ft. to 19.5 ft. From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 3.5 ft. to 19.5 ft. From ft. to ft. From ft. to ft.									
SCREEN-	PERFORA	TED INTERVALS:	From 4.5	tt. to	19.5	ft. From	ft. t	o ft.	
From II. 10 II. From II. 10								ο π.	
GK	AVEL PAG	LK INTERVALS:	From 3.5	. II. 10	19.5	II. From		o II.	
From II. to II. From II. to II.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3 Bentonite (4) Other concrete, 0-2 ft									
Grout Intervals From 2 ft. to 3.5 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 Direction from well? West 12 Fertilizer storage 15 Oil well/ gas well How many feet? ~83 ft									
				·			CINIC DIT	CDVALC	
FROM	TO		LOGIC LOG	FROM	TO	PLUC	GING INT	EKVALS	
1,	0.5' 14'	Concrete	oist, stiff, no petroleum						
1	14	odor	ioist, stiff, no petroleum	+					
14'	17.5'		ith gray-green, moist,						
		stiff, no petroleum	odor						
17.5'	19.5'	Silty clay with high							
			reen, moist, stiff, no	-					
		petroleum odor				Flushmount wa	iver from 1	ROW	
				-	- 1	r iusniniount wa	iver irom	J. 11	
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) 3/4/08 and this record is true to the best of my knowledge and belief.									
Kansas Wa	ter Well Co	ntractor's License No.	757 . This Wa	ter Well Red	cord was co	impleted on (mo/o	lay/year)3	3/19/08	
		e of Larsen & Asso	ciates, Inc.	by (signatu	re)				
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.									