	ATER WEI			CORD		Form W	/WC-5P		KSA 82a-1212	ID No	
1 LOCATIO	ON OF WATE	ER WELL	Fract	ion					Section Number	Township Number	er Range Number
County: S	edgwick		N\	N 1/4	NW	1 1/4	SW	1/4	36	27	01 E
				n or cit	y street	addres	s of well	if lo	cated within city?		
	004 S. Oli										
	WELL OWN			HE	Laste	04	C!4-	440	D	d of A and ordered Divis	des estates Deserves
	ddress, Bo			oo Sw peka,			Suite	410		-	sion of Water Resources
MARK W	, ZIP Code /ELL'S LOCA	ATON WI	THAN							cation Number:	
3 "X" IN SE	ELL'S LOCA	(:	4	DEPTH	OF WE	ELL		29.	44 ft.		
	N		_	WELL'	S STAT	IC WATE	RIFVF	l	19.62 ft.		
			1	*****	0 0 17 11						
×		į NE		WELL	WAS US	SED AS:					
1	``	- NE	1		1 Dome	actic	5	Publi	c Water Supply	9 Dewa	aterina
w		- 1	E	1 Domestic 5 Public Water Supply 2 Irrigation 6 Oil Field Water Supply						toring Well	
"		1 ~	3 Feedlot 7 Lawn and Garden (c					, , ,			
	! !	-			4 Indus	strial	8	Air C	onditioning	12 Other	r
S	SW	- SE	Wa	as a cher	mical/ba	cteriologi	ical samp	le su	bmitted to Departme	nt? Yes	No X
		Ì					ıs submit			·	
	S								No X		
5 TYPE OF	F BLANK CA	SING US	ED:								1.00
1 Steel			(SR)	5 Wrot	ught		7 Fiberg	lass	9 Other	(specify below)	
2 PVC		4 ABC					8 Concr				
Casing h	eight above	or below l	and surfac	е	0.0	in.	Overd	rille	d to 20 feet belo	ow ground surfac	e (bgs)
6 GROUT	PLUG MAT	FRIAL:	1 Neat ce	ment	2 Cem	ent arout		Ben	tonite 4 Ot	her Concrete	
,							_				
Grout P	lug Intervals	From _		. to	2	ft. Fro	om	2	ft. to 29.4	ft. From	ft. to ft.
What is	the nearest	source of	possible c	ontamin	ation:						
. 1 Sor	atic tank		6 50	onago n	.:4		. 11 5	Euol o	torago	16 Other (spec	oify holow)
1 Septic tank 2 Sewer lines				6 Seepage pit 7 Pit privy			11 Fuel storage12 Fertilizer storage			10 Other (spec	Jily Delow)
								13 Insecticide storage			
· ·									andoned water well		
5 Ces					•				ell/ Gas well		
Direction fro	om well?						How m	nany f	feet?		
Direction in					-		1100011	idity i			
FROM	то	CODE			PLU	GGING I	MATERIA	ALS			
0	2			oncrete							
2	29.44	Benton	tonite 400 lbs.								
										1	
		1	-							1	•
7										J	
H CON		S OR LA	NDOWNE			ATION: 1				er my jurisdiction and	
1	mo/day/yr)			11-21	-05			this,		-	edge and belief. Kansas
Wat	er Well Cor		. 7	•			31	/			oleted on (mo/day/yr)
		15-05	<i>[</i> [under th	re busir	ness na	me of	// -	Ge	otechnical Servic	es, Inc.
	(signature)		00		~~	W	1	_	~		
INST	RUCTION	S: Pleas	se fill in b	lanks a	nd circ	le the c	orrect a	insw	ers. Send three of	copies to Kansas De	epartment of Health and
	onment, B I one to Wa								ropeka, Kansas (oozo-ooo i. Telepi	hone: 785-296-3565.