			WATE	R WELL RECORD	Form WW	C-5 KSA	82a-1212	ID No.	AS-3		
1 LOCATION			Fraction			Section Nu	mber	Township Num	ber	Range Numb	ег
County:	Sedg	wick	NW ½	SE ¼	NW ½	28		т <b>27</b>	S	R 1	ŒW.
				iress of well if loc	ated within cit	y?					
1202 S Was											
			rt Enterprises								İ
RR#, St. Addre	ess, Box#	: 1202 S	Washington				1	Board of Agricult	ure, Division	of Water Res	ources
City, State, ZIP	Code	: Wichit	a, Kan <del>s</del> as 67	211				Application Num	ber:		
3 LOCATE W	ELL'S LOCA	ATON WITH	4 DEPTH OF C	OMPLETED WE	11	32 n	FI FVATI	ON·			
	N	Λ.	Depth(s) Ground	water Encounter	 w 1	17.40	# 2	O.L	# 3		ç
A .	<del></del>	<del></del>	WELL'S STATIC	WATED I EVE	170	f bolow	land curfo	oo maasurad on	moldeybe		ft. OF
I I		! I	I								·
1	···-	NE		test data: Wel							
₩ w	x	i   _	Est. Yield NA	gpm: vvei	water was		п. ап	er	nours pump	oing	
± w		ŧ E	Bore Hole Diame WELL WATER T 1 Domestic	ILET O BE LISED AS:	n. to 5. Public we	tor eunnly	п. г	and 8 Air conditionin	in. to	ection well	ft. 2
	1	-	1 Domestic	3 Feed lot	6 Oil field v	vater supply		9 Dewatering	12)0	ther (Specify t	pelow)
;	SW	SE	2 Irrigation	4 industrial	7 Lawn and	d garden (do	mestic)	10 Monitoring w	rell	Air Sparg	e
<b>†</b>			Was a chemical/	bacteriological sa	mple submitte	d to Departr	ment? Yes	No X	If yes, mo	/day/yr sample	was
	S		submitted					Well Disinfected?			X
5 TYPE OF E	BLANK CASI	NG USED:		5 Wrought Iro	n 8 (	Concrete tile		CASING JOINT			d
1 Steel			(SR)	-						Ominpo	
2)PVC		4 ABS		7 Fiberglass					Threeder	<b>X</b>	
	diameter		in. to 30.0	-		in to					
Blank casing o	nameter		in to Sount	in unicht		_ 111. 10		., Dia		Schadule	40
Casing neight	adove Iang s	SUITACE TO	lush Mount N MATERIAL:	in., weight		(7) PVC"	DS./π. vva	In Unickness of ga	luge No.	Scrieduic	·
1 Steel		3 Staink	ess steel	5 Fiberniass		8 RMP	(SR)	11 Other	snecify)		
2 Brass			nized steel		le	9 ABS	(0,1)	12 None i	sed (open h	ole)	
SCREEN OR								Saw cut			hole)
1 Conti	nuous slot	(3)	Mill slot	6	Wire wrappe	d	ξ	Drilled holes			
2 Louve	ered shutter	¥	Key punched		Torch cut		10	Other (specify	)		
SCREEN-PER	RFORATED	INTERVALS:	From	<b>32.0</b> ft. to	30.0		_ft. From	1	ft. to		ft.
			From	ft. to			_ft. From	1	ft. to		ft.   3
GRAV	/EL PACK IN	ITERVALS:	From	32.0 ft. to	2	9.0	_ft. From	1	ft. to		ft.
				ft. to			ft. From	3	ft. to		ft.
6 GROUT M	ATERIAL:	1 Neat	cement 2	Cement grout		3 Bentonite	1	ther Sand			
Grout Intervals	s From		ft. to	ft. From	4.0	ft. to	29.0	ft. From	0.0	ft. to <b>4.0</b>	ft.
			contamination:					pens		oned water we	
1 Seption	c tank		4 Lateral lines	7 P	it privy	(1)	Fuel stor	age (former)	15 Oil well	l/ Gas well	
2 Sewe	er lines		5 Cess pool		ewage lagoon	12	Fertilizer	storage	16 Other (	specify below	)
3 Wate	rtight sewer	lines	6 Seepage pit	9 F	eedyard	13	Insecticio	le storage			
Direction from	well?			NA			many fee	t?	0		
FROM	TO	CODE				LITHOLOG	IC LOG				
0.0	1.0		rk Brown Clay								
1.0	12.0 14.0		ght Brown clay		· · · · · · · · · · · · · · · · · · ·						
12.0	29.0		ght Gray, fine ork Gray sand,		ona hydro	erhon od	lor	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
29.0	32.0		ght Brown san			Jai Doil Ou					
1 20.0			J. 10 10 10 11 10 10 11	,,	- J						
		Вс	oring terminate	ed @ 32.0							
				Flush-n	nount well	completio	n waive	r existent for	site.		
						<del></del>					4
<del></del>										11-1	/
7 CONTRAC	TOR'S OF	ANDOMNE	D'S CERTIEICAT	ION: This water	wall was Al A	netnicted /2	) monneta	icted or (3) nive	ned under m	iunsdiction or	was .
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/yr)  3/20/08  and this record is true to the best of my knowledge and belief. Kansas											
completed on (mo/day/yr)  3/20/08  and this record is true to the best of my knowledge and beliefs. Kánsas  Water Well Contractor's License No.  692  This Water Well Record was completed on mp/day/yr)  3/20/08											
1						I IBS VVater V			Alou kulovasi		7.70
under the bus				State Servi		n Kanese Do		signature)	omen Rures	u of Wester 100	dsw
INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.											7
										7	