WATER WELL I							urces; App. No			
1 LOCATION OF V	VATER WELL:	Fraction SE 4	NW ¼	NW ¼	ection Nu	ımber	Township N T 27	Number S	Range R	Number I E
1 LOCATION OF WATER WELL: Fraction Sedgwick SE ¼ NW ¼ NW ¼ Distance and direction from nearest town or city street address of well if located within city? 2829 N. Emporia, Wichita KS Section Number T winship Number T 27 S R 1 E Global Positioning System (decimal degrees, min. of 4 digits) Latitude: N 37.73471°										
located within city? 26.	29 N. Emporia, W	Cilita K5		I	ongitude	: W 97	7.33305°			
2 WATER WELL OWNER: KDHE RR#, St. Address, Box # : 1000 SW Jackson City, State, ZIP Code : Topeka KS 66612 Elevation: Rim:1311.74; TOC: 1311.50 Datum: WGS84 Data Collection Method: legal survey										
RR#, St. Address, E	Box # : 1000 S	W Jackson		I	otum:	WGS	Sethod: legal	CHTVAV		
City, State, ZIP Coo	de : Topeka	COMPLET	ED WEI	I 20.55	Jala Colle	ection iv.	ft	Survey		
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 20.55 ft. LOCATON MW7										
WITH AN "X" IN	Depth(s) Groun	dwater Enco	untered 1			ft. 2		ft. 3		ft.
SECTION BOX:	WELL'S STAT	IC WATER	LEVEL	13.16 ft.	below lai	nd surta	ce measured	on mo/a	ay/yr	2/26/14
N	Pump	test data: \	Well water	was	ft.	after	hou	rs pumpi	ng	gpm gpm
V	Est. Yield	gpm: \	Well water	was	ft.	after	hou	rs pumpi	ng	gpm
- x iw vE	WELL WATE	R TO BE US	ED AS: 5	Public wat	er supply	8 A11	conditioning	g II In	jection v	vell fractions
w - - -	E 1 Domestic 3 2 Irrigation 4	reed lot 6	Domestic	Water suppi	y arden) (1	Moni	atering	12 Ouis	er (Speci	ly below)
	2 irrigation 4	muusu iai /	Domestic	(lawii & gi	inden) ((V) (VIOII)	itornig wen			
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs										
S	Sample was sul	mitted	-		V	Vater W	ell Disinfecto	ed? Yes		No X
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 Threaded Y										
1 Steel 3	RMP (SR) 6	Asbestos-Ce	ment	9 Other (s	pecify be	low)		Welder	d 	
(2) PVC 4	ABS 7	Fiberglass	D:-				Dia	I nread	ea	<u>X</u>
Blank casing diameter	2 in. to	10.55 π.,	Dia	ш	1. 10	 /fr W/al	thickness or	r gange N	ιο Ιο	IL.
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 10.55 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.24 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)										
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 Gauze wrapped 2 Torch cut 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 10.55 ft. to 20.55 ft. From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 8 ft. to 20.85 ft. From ft. to ft. From ft. From ft. To ft. From f										
2 Louvered shutte	Key punche	d 6 Wire	wrapped	8 Saw C	Cut 1	0 Othe	r (specify)			
SCREEN-PERFORAT	ED INTERVALS:	From	10.55	_ ft. to	20.55	. ft. Fro	om	ft. to		ft.
		From		ft. to		. ft. Fro	om	ft. to	·	ft.
GRAVEL PACE	K INTERVALS:	From	8	ft. to	20.85	N. Fro	om 	n. u) 	π.
		From				II. FIG	<u> </u>	IL. II	<u> </u>	11.
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1' Grout Intervals From 1 ft. to 8 ft. From ft. to ft. From ft. to ft.										
What is the percent sou	m I π. το	tamination:	From	It. I	.0	IL.	rrom		11. 10	It.
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			l l) Fuel sto			indoned water		belov	
3 Watertight sewer	lines 6 Seepage p	it 9 Feedya					well/ gas we	11		
Direction from well? E How many feet? ~160'										
FROM TO		OGIC LOG		FROM	TO		PLUGGI	NG INTE	RVALS	
	Broken concrete of		ilty clay							
	vith metal fragme Jedium gray sand			-						
10 20.05 N	zourum grug bund									
						Flushn	nount waive	r from B	ow	
F. CONTROL CONCESS	OD I AMBOURA	DIC CEDE		NI. TI	4		(A)		-1-1 - 10	N -1 - 1
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) econstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 2/26/14 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 (morday/year) 3/14/14										
under the business name of	of Larsen & Asso	ciates, Inc.		by (signatu	re)					
INSTRUCTIONS: Please fi	ill in blanks or circle the	correct answer	s. Send top t	hree copies to	Kansas De	partmeli	Health and E	nvironment	Bureau of	f Water,
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 a 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.										