		KECOKD						ources; App. No.		
1 LOC	ATION OF	WATER WELL:	Fraction	NW i/	NW /	Section N	umber	Township Number	Range Number	
Distance	and direction	on from nearest town	or city stree	t address o	f well if G	lobal Pos	itioning	System (decimal de	egrees min of 4 digits	
LOCATION OF WATER WELL:   Fraction   Sedgwick   SE ½ NW ½ NW ½   Section Number   Township Number   T 27 S R 1 E										
2 WATER WELL OWNER: KDHE Elevation: Rim:1311.07; TOC: 1310.81										
DD#	St Address	Boy # . 1000 S	W Jackson		1 1	Datum:	WGS	284		
City	State, ZIP (	Code : Topeka	KS 66612			Data Coll	ection N	lethod: legal surve	V	
City, State, ZIP Code : Topeka KS 66612 Data Collection Method: legal survey  3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 20.07 ft.										
LOCATON MW9										
	H AN "X" ]	N Denth(s) Groun	dwater Enc	ountered 1			ft 2	ft f	3 #	
1	TION BOX	Depui(s) Oloui	ric Water Elic	Ountered i	12.74 A	halow la	nd curfo	oo measured on mo	/dox/sm 2/26/14	
SEC										
	N Pump test data: Well water was ft. after hours pumping gpr Est. Yield gpm: Well water was ft. after hours pumping gpr									
	W NE -	Est. Yield	gpm:	well water	was	π.	anter	nours pum	ping gpm	
- ; i	<b>ν−</b> νε −							r conditioning 11		
l w 🗀	W I Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below									
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (U)Monitoring well										
├─sw <del> </del> se										
	Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs									
	S	Sample was su	omitted			1	Water W	ell Disinfected? Ye	es 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 2 PVC 4 ABS 7 Fiberglass Threaded X										
1 St	eel	3 RMP (SR) 6	Asbestos-C	ement	9 Other (s	pecify be	low)	Weld	ied	
(2) PV	VC.	4 ABS 7	Fiberglass			1	,	Thre	aded X	
Blank cas	ing diamete	er 2 in to	10 07 ft	Dia	i1	to	fi	Dia i	n to ft	
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 10.07 ft., Dia in. to ft., Dia in. to ft.  Casing height below land surface 0.26 ft., Weight lbs./ft. Wall thickness or gauge No.										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
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 Ashestos-Cement 12 None used (onen hole)										
ISCKEEN	UK PEKEC	JKATION OPENIN	IN AKE:							
1 Continuous slot (3) Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)										
1 Continuous slot 3 Mill slot 5 Gauze 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 10.07 ft. to 20.07 ft. From ft. to ft.										
SCREEN-PERFORATED INTERVALS: From 10.07 ft. to 20.07 ft. From ft. to ft.										
			From		ft. to		ft. Fro	om ft.	to ft.	
GR	RAVEL PAG	CK INTERVALS:	From	8	ft. to	20.37	ft. Fro	om ft.	to ft.	
			From		ft. to		ft. Fro	om ft.	to ft.	
From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 8 ft. to 20.37 ft. From ft. to ft. From										
Grout Inte	ervals F	rom 1 ft to	8 ft	From	fi fi	to	ff ff	From	ft to ft	
Grout Intervals From 1 ft. to 8 ft. From ft. to ft. From ft. to ft. From ft. to ft. What is the nearest source of possible contamination:										
	tic tank	4 Lateral lin			10 Livestoo	k nens	13 Inse	cticide Storage	16 Other (specify	
	ver lines	5 Cess pool						ndoned water well	below)	
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										
	from well?		, 1000,		How many			WOLL BOD WOLL		
	,		OGIC LOG					DI LICCING DI	PEDMAIC	
FROM 0	TO 5	Brown silty clay	OGIC LOG		FROM	TO		PLUGGING INT	EKVALS	
5	10	Gray silty clay								
10	15	Medium sandy clay	,		+					
15	20.37	Medium sandy cia								
		ALL WINE SHILL			<b>-</b>					
							Flushm	ount waiver from	BOW	
		00.		TTT 6 : ===						
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)  Kansas Water Well Contractor's License No										
				Inis Wa			omplete	on (mo/day/year)	3/14/14	
		of Larsen & Asso			by (signatu				<u> </u>	
INSTRUCT Geology Sec	IONS: Please	fill in blanks or circle the	correct answer	rs. Send top t	hree copies to	Kansas De	partmen	Health and Environme	nt, Bureau of Water,	
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department, o 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.										