WAIL	R WELL	RECORD	Forn	n wwc-5	D	ivision of	Water R	esources: A	pp. No.		
1 LOC	ATION OF	WATER WELL: Cowley	Fraction SE 4	NE %	NE %	Section	Numbe	T Town	ship Number	Range	Number 3
Distance located w	and direction	Cowley n from nearest town 06 E. Lewis Udall,	or city stree	et address of	well if	Global P	osition	ing System 37.38877°	n (decimal deg	rees, min	. of 4 digits
		00 21 20 11 0 0 0 0 11,				Longitu	de: W	97.11594	0		
2 WAT	ER WELL	OWNER: KDHI	Ē			Elevation	on: R	IM: 1283.9	5 TOC: 128	3.66	
RR#, St. Address, Box # : 1000 SW Jackson								ove mean			
		ode : Topeka				Data Co	llection	n Method:	legal survey		
3 LOCA	ATE WELL	'S 4 DEPTH OF	COMPLE	TED WEL	L 31			_			
LOCA	ATON					MW12	2				
WITH	H AN "X" I	N Depth(s) Groun	ndwater End	ountered 1			ft.	2	ft. 3		ft.
SECT	TION BOX:	N Depth(s) Groun WELL'S STA	TIC WATE	R LEVEL	28.5	ft. below	land su	rface meas	sured on mo/o	day/yr	4/16/08
	N	Pum	test data:	Well water	was		ft. after		hours pump	ing	gpm
	Ti	Pump Est. Yield	gpm:	Well water	was		ft. after	·	hours pump	ing	enm
	v— v k ×	WELL WATE	R TO BE U	SED AS: 5	Public v	vater supr	olv 8	Air condit	ioning 11 I	niection	well
	1 1	1 Domestic 3	Feed lot	6 Oil field v	vater sur	nlv	9 D	ewatering	12 Otl	ier (Spec	ify below)
W		E 2 Irrigation 4	Industrial	7 Domestic	(lawn &	garden)	(10)M	onitoring v	well	-01 (Sp00	, 001011)
L	., 	2 migation ,	maastriai	Domestic	(1411111 4	, gardon,					
Fsv	v — SE —	Was a chamica	l/bacteriala	aical cample	cubmitt	ed to Den	artman	t? Vac	No V	If was m	00/d0x/xma
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/y Sample was submitted Water Well Disinfected? Yes No X											
	S	Sample was su	ommed				water	Well Dist	inected? 1 es		NO X
5 TYPE	E OF CASIN	NG USED: 5	Wrought Ir	on :	8 Conc	ete tile	CA	ASING JO	INTS: Glued	Cla	amped
1 St	eel :	3 RMP(SR) 6	Asbestos-C	Cement	9 Other	(specify	below)		Welde	ed	
(2) PY	VC .	4 ABS 7	Fiberglass						Threa	ded	X
Blank cas	sing diamete	r 2 in. to	16 f	t., Dia		in. to		ft., Dia	in	. to	ft.
Casing he	ight below la	nd surface 0.2	9 ft., W	eight		lb	s./ft. V	Vall thickn	ess or gauge	No.	
TYPE OF	SCREEN (OR PERFORATION	MATERIA	AL:					5		
1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify)											
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) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 16 ft. to 31 ft. From ft. to ft.											
1 00	ontinuous sid	ot (3)Mill-slot	5 Gua	ze wrapped	7 Tor	ch cut	9 D	rilled holes	ll None	(open h	ole)
SCREEN	DEDECT SHUL	TED INTERVALC	o o wite	e wrapped	0 5av	7 Cui	10 0	Erom	·y)		<u>-</u>
SCREEN	-PERFORA	IED INTERVALS	. F10III	10	. 16. 10		· Δ	From	IL. (۱۱۰
C.	ANDI BAC	CK INTERVALS:	From		. п. ю		п.	From			π.
Gr	CA VEL PAC	K INTERVALS:	From	15	. 11. 10	31	п.	riom			
			From		π. το		n.	rrom	ft. 1		π.
6 GRO	UT MATER	MAL: 1 Neat cen om 2 ft. to	nent 2 Cer	ment grout	(3) Ben	tonite	(4)Oth	ner concre	te, 0-2'		
Grout Inte	ervals Fr	om 2 ft. to	15 ft.	From	f	. to		ft. From		ft. to	ft.
What is th	ne nearest so	urce of possible con	ntamination:	:							
1 Sep	tic tank	4 Lateral li				tock pens	13 I	nsecticide	Storage	16 Oth	er (specify
2 Sev	ver lines	5 Cess poo	l 8 Sewa	ge lagoon (1	l) Fuel s	torage	14 A	Abandoned	water well	belo	w)
		er lines 6 Seepage	pit 9 Feedy	ard 1	2 Fertili	zer storag	ge 15 (Dil well/ ga	s well		
Direction	from well?	E		F	Iow mar	y feet?	-260				
FROM	TO	LITHO	LOGIC LOG	3	FROM	1 · TO	<u> </u>	PLU	GGING INT	FRVALS	\$
0	1	Grass, Topsoil - S			1101	10	_	120	CONTO IITI	211 171121	
<u> </u>		moist, no odor		, 210	 						
3	5	Silty clay, brown,	moist, no o	dor							
8	10	Weathered shale,			1						
		crystals and veinir									
		odor									
13	31	Weathered shale,		an to white,							
		calcitic, dry, no od	or								
					ļ		Flus	hmount w	aiver from l	BOW	
T CONT	D A CTOR	CORTANDON	EDIC CER	PIPICA MIC	NI. TT	1		1	1 (2)		2) -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) 4/15/08 and this record is true to the best of my knowledge and belief											
Kansas W	urisdiction an	iu was completed on (mo/day/year)	This Was	er Well l	and th	s comple	eted on (ma	day/year)	knowledge 1/30/08	e and bener
Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 4/30/08 under the business name of Larsen & Associates, Inc. by (signature)											
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 Se	ction, 1000 SW	Jackson St., Suite 420,	ie correct answ Fopeka, Kansa	ers. Send top ti s 66612-1367	ree copie: Telephone	785-296-5	522. Sen	done to WA	TER WELL OW	NER and r	etain one for
your records	s. Fee of \$5.00	for each constructed we	II. Visit us at h	ttp://www.kdhe	ks.gov/wa	terwell.		1111			