WATE	R WELL	RECORD	Form WWC	-5 Di	vision of Water R	esources; App. 1	No.		
		WATER WELL: Fract	ion	BIXX/	Section Number 14	er Township	Number Ra	nge Number	
Distance	and direction	Finney NV n from nearest town or cit	v street address	of well if	14 Global Position	ing System (de	S R	min of 4 digits)	
Distance and direction from nearest town or city street address of well if located within city? 3100 W. 6 Miles Rd., Garden City KS  Global Positioning System (decimal degrees, min. of 4 digits) Latitude: N 38.06078°  Latitude: N 38.06078°									
2 WAT	ER WELL	OWNER: Boyd Funk			Longitude: W 100.91776° Elevation: RIM: 2884.25; TOC: 2883.41				
			ile Rd.		Datum: W	/GS84	OC. 2003.41		
City, S	State, ZIP C	ode : Garden City l	KS 67846		Data Collection	n Method: leg	al survey		
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 115 ft.									
LOCA		Danth (a) Committee (			MW8R	•	0 0		
i	I AN "X" I 'ION BOX:	1 X \ /	er Encountered I	92 10 4	II.	Z	tt. 3	tt.	
SECT	N N	Pump test of	lata: Well wate	03.101	t. below failu st	irrace measure	u on mo/day/yr urs numning	9/10/11	
X		Pump test of Est. Yield	gpm: Well water	er was	ft. after	ho	urs pumping	gpm	
	V	WELL WATER TO	BE OSED AS:	5 Public w	ater supply 8	Air conditioni	ng 11 Injecti	on well	
w  i		1 Domestic 3 Feed	lot 6 Oil field	d water sup	olv 9 D	ewatering	12 Other (St	pecify below)	
		2 Irrigation 4 Indus	trial 7 Domest	ic (lawn &	garden) (10)M	Ionitoring well			
⊢sy	Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs								
<u> </u>		Sample was submitte	eriologicai samp	ie submitte	d to Departmen	it? Yes "Well Diginfoo	No X ; If yes	s, mo/day/yrs	
5 TVDE	OFCASI	Sample was submitte		0.0	w ates	4 apric Tobia	neu? res	- NO A	
1 Ste	or CASII	NG USED: 5 Wrou	ignt iron	8 Concre	ete tile C	ASING JOINT	S: Glued	Clamped	
(2) PX	/C	3 RMP (SR) 6 Asber 4 ABS 7 Fiber	olace	9 Oniei	(specify below)		Threaded	·	
Blank cas	ing diamete	r 4 in. to 90	ft Dia		in. to	ft Dia	in to	ft	
Casing height below land surface 0.84 ft., Weight lbs./ft. Wall thickness or gauge No									
2 PVC 4 ABS 7 Fiberglass Threaded X  Blank casing diameter 4 in. to 90 ft., Dia in. to ft., Dia in. to ft.  Casing height below land surface 0.84 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)									
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)									
SCREENING PERHARATION ADENINGS ADD:									
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)									
2 Louvered shutter ** Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From 90 ft. to 115 ft. From ft. to ft.  From ft. to ft. From ft. to ft.  GRAVEL PACK INTERVALS: From 88 ft. to 115 ft. From ft. to ft.  From ft. to ft. From ft. to ft.  From ft. to ft.									
SCILLEIV.	-I EKTOKA	Fro	om	ft to		From	n. to	π.	
GR	AVEL PAG	CK INTERVALS: Fro	om 88	ft. to	115 ft.	From	ft to	ff	
		Fro	om	ft. to	ft.	From	ft. to	ft.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Rentonite (4) Other Concrete: 0-86ft									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-86ft Grout Intervals From 86 ft. to 88 ft. From ft. to ft. From ft. to ft.									
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 8 Sewage lagoon (11) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well									
Direction	from well?	E E	recuyatu		y feet? ~35ft	Jii weii/ gas w			
FROM	ТО	LITHOLOGIC	CLOG	FROM		DLUCC	INIC INITEDIA	AT C	
0	20	Gravel on top; Brown, soft, sil		- FROW	10	PLUGG	ING INTERVA	ALS	
20	115	Fine, brown, sandy clay							
			***************************************						
···		***************************************							
					101	h.m.o.u	iom BOW		
						hmount waiver fr			
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. 757  This Water Well Record was completed on (mo/day/year) 10/10/11									
		of Larsen & Associate	5/ . Inis V <b>s. Inc.</b>	Vater Well R by (signa		eted on (morday	(year) 10/10/	11_	
INSTRUCT	IONS: Please	fill in blanks or circle the corre	et answers. Send to	n three conies	to Kaneae Departm	ent of Health and	Environment Bur	eau of Water	
Geology Sec	Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send on the 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.								