WATE	R WELL	RECORD	Form WWC-5	Divi	sion of Wa	ater Reso	urces; App. No.		
1 LOCA	ATION OF	WATER WELL:	Fraction SE 1/2	SE ¼			Township Number		
County: Sedgwick SE ½ SE ½ SE ½ 34 T 27 S R 1 EDistance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)									
located within city? 3118 E Pawnee Wichita, KS Latitude: N 37.65036°									
A WATER WELL OWNER B L O M A WENT						Longitude: W 97.29964°			
2 WATER WELL OWNER: Bob & Marv's (KDHE)						Elevation: RIM: 1289.96 TOC: 1289.52			
City S	RR#, St. Address, Box # : 1000 SW Jackson City, State, ZIP Code : Topeka, KS 66612					Datum: above mean sea level Data Collection Method: legal survey			
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 22 ft. LOCATON MW23									
		N Donth(s) Group	advector Engagetared 1		WI W 23	fr 2	A 2	Δ.	
1	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft WELL'S STATIC WATER LEVEL 12.97 ft. below land surface measured on mo/day/yr 10/3/08								
SECTION BOX: WELL'S STATIC WATER LEVEL 12.97 ft. below land surface measured on mo/day/yr 10/3/08									
X N Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm									
Est. Yield gpm: Well water was ft. after hours pumping gpm									
NW—NE— WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
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) (10) Monitoring well									
- sw se									
<u> </u>	Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs								
	S	Sample was sui	omitted		V	Vater W	ell Disinfected? Yes	No X	
Sample was submitted Water Well Disinfected? Yes No X 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped									
1 Ste	eel	3 RMP (SR) 6	Asbestos-Cement 9	Other (s	pecify be	low)	Welde	ed	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded (2) PVC 4 ABS 7 Fiberglass Threaded X									
Blank cas	ing diamete	er 2 in. to	7 ft., Dia	i	n. to	ft	Dia in	. to ft.	
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 7 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.44 ft., Weight lbs./ft. Wall thickness or gauge No.									
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 7 ft. to 22 ft. From ft. to ft.									
From ft. to ft. From ft. to ft									
GRAVEL PACK INTERVALS: From 5 ft. to 23 ft. From ft. to ft									
From ft. to ft. From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite (4) Other Concrete: 0-2'									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-2' Grout Intervals From 2 ft. to 5 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									
	ver lines	5 Cess pool					indoned water well	below)	
		er lines 6 Seepage p					well/ gas well		
Direction from well? SW How many feet? ~100									
FROM	TO	LITHO	LOGIC LOG	FROM	TO		PLUGGING INT	ERVALS	
0	1	Clay with medium sand	d, brown, some gravel, low						
		plasticity, slightly mois	t						
4	5		own, moderate plasticity,						
		moist							
8	9		moderate plasticity, moist		-				
11	12	Fine sand, clayey, brow							
18	24	Medium to coarse sand							
10	44	Medium to coarse sand *Lost 2' total well dept		 		Flushn	nount waiver from I	BOW	
	 	Lost 2 total well dept	n to sand cave-in	 	 	1 1431111	iount waiver from 1	7011	
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) 10/3/08 and this record is true to the best of my knowledge and belief.									
Kansas Wa	ater Well Co	ntractor's License No.	757 . This Wat				on (mo/day/year) 1		
		e of Larsen & Asso		by (signati					
INSTRUCT	TIONS: Pleas	e fill in blanks or circle th	ne correct answers. Send top th	ree copies to	Kansas De	partment	of Health and Environmen	t, Bureau of Water,	
Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Sand 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.									