	VELL REC	CORD	Form WW			ivision of Water sources App. No.		 Well ID	MW1D
		VATER WELL		Fraction			per Township Nun		Number
County Sedgwick									
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:									
	ss: Miller's Cl					own or intersection S Maize Rd., Wich	,	idress, check h	ere:
Addres		ze Ka.		ĺ~	700 SW 01 323 I	5 Maize Rd., Wici	nta KS		
City		chita St	ate: KS 2	ZIP:					
	TE WELL	4 D	EPTH OF COM	PLETED WELL:	90 ft	5 Latitude:	*******************************	***************************************	ecimal degrees)
1	"X" IN	Depth(s) Groundwater En	countered: 1)	ft	Longitud	***************************************	************************	cimal degrees)
SECT	ION BOX:	2)	ft 3) STATIC WATE	ft, or 4) L R LEVEL: NA	Ory Well		Datum: WGS Latitude/Longitude		83 NAD 27
	N T						unit make/model:	:)
'	below land surface, measured on (mo-da above land surface, measured on (mo-da above land surface, measured on (mo-da above land surface).						AAS enabled?	Yes No	
NW NE X above land surface, measured on (mo-da Pump test data: Well water was					ft		Survey Topog		,
w after hours pumping									
"			Wat	er well was	ft				- I Imaa
sw	SE SE			s pumping	gpm	6 Elevation	***************************************	Ground L	_
] .		Estim	ated Yield:	gpm		Source	Land Survey		Topographic Map
	S	Bore 1	Hole Diameter: _	6 in toin to	ft, and		Other .		
				ш					
7. WELL WATER TO BE USED AS:									
1 Domestic:			ublic Water Supp	-			Water Supply: -leas	e	
House			ewatering: how	•		11 Test Hole: we			
Lawn Livest	& Garden		quifer Recharge: Ionitoring: well I			Cased 12 Geothermal: H	Uncased	Geotechnic	SAL
2 Irrigat		_	onnoring: wen i onmental Remedi			a) Closed Lo		l Vertic	
3 Feedlo			ir Sparge	Soil Vapor Extracti	or	b) Open Loo	· 	ischarge	-
4 Indust		=	ecovery	Injection		Other (sp	· <u></u>		
Was a chemical/bacteriological sample submitted to KDHE? Yes X No If yes, date sample was submitted: Water well disinfected? Yes X No									
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clampled Welded X Threaded Casing diameter 2 in. to 70 ft, Diameter in. to ft, Diameter in. to ft, Casing diameter ft, Diamet									
Casing height above land surface 0 in. Weight lbs./ft. Well thickness or gauge No									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
Steel Stainless Steel Fiberglass X PVC Other (Specify)									
Brass Galvanized Steel Concrete tile None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
==		X Mill Slot	Gauze	• • • ==	····	illed Holes	Other (Specify	<u>y) </u>	
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole) SCREEN-PERFORATED INTERVALS: From 70 ft. to 90 ft, From ft. to ft, From ft. to ft,									
1		INTERVALS: F	rom 70 1	t. to 90 ft,	From				
		NTERVALS: F			From		ft, From	11. 10	11,
1	MATERIAL:			ent grout X Bente		ner Concrete: 0-0			
Grout interva	*******		68 ft, Fro	omft. to	tt, F	romft.	toft,		
	_	e contamination		Dia Deire		vente al. Dona	Imposticid	- Ctorono	
Septic Sewer		=	ateral Lines ess Pool	Pit Privy Sewage Lagoon	==	vestock Pens el Storage	Insecticid	ed Water Well	
==	Lines tight Sewer Lin		ess Pool eepage Pit	Feedyard		rtilizer Storage		Gas Well	
==	(Specity)		, ,		re	zor Grorage	On well?	JES WOIL	
Direction from	***************************************			Distance from w	rell?		ft		
10 FROM	ТО		LITHOLOG	IC LOG	FROM	ТО	LITHO, LOG (co	ont.) or PLUGGI	NG INTERVALS
0	0.3	Topsoil			75	85	Clay w/ very coars		
0.3	7	Silty clay			85	90	Fine-Coarse sand	w/ pea gravel	
7	12	Silty clay w/ fine							
12	17 40	Fine-medium san Fine-coarse sand	d						
40	45	Fine-coarse sand	w/ silt						
45	60	Fine-medium san				s: KDHE ID: Miller's Cleaners; C2-087-73383			
60 70 Clay w/ coarse sand Target of monitoring well is shallow groundwater, <20' of grout was installed a									t was installed at
70 75 Fine-coarse sand w/ clay the direction of KDHE.									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was jurisdiction and was completed on (mo-day-year) 1/24/18 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's									
jurisdiction and was completed on (mo-day-year) 1/24/18 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 (mo-day-year) 2/1/18									
1	usiness name	of Larsen & Ass	ociates, Inc.	*		Signature)	_:
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment Survey of Water, GWTS Section,									
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.									
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									