WATE	R WELI	L RECORD	Form WWC-5	Div	ision of W	ater Reso	urces; App. No			
County:	(WATER WELL: Crawford	NW ¼ NW ¼	NE ¼	24		T 29	S	Range Number	
Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)										
located within city? Latitude: 37.51350°										
220 N. Summit, Girard Longitude: 94.84271								. 004 9	22	
2 WATER WELL OWNER: Sixty-Six Food Mart Inc. RR#, St. Address, Box # : PO Box 876						Elevation: TOC: 994.58; RIM: 994.83 Datum: WGS84				
								SIITVEV		
City, State, ZIP Code : Parsons, KS 67357-0876 Data Collection Method: legal survey 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 11 ft.										
LOCATON WELL'S 4 DEFIN OF COMPLETED WELL 11 MW3										
I .	H AN "X"]	IN Depth(s) Groun	ndwater Encountered l		141 44 2	ft 2		ft 3	£	
i	TION BOX	· WELL'S STAT	TIC WATER LEVEL	0.25 fi	helow la	and surfa	ce measured	$\frac{1}{2}$	1/11/11	
SEC	N N	Pumr	test data: Well water		UCIOW 12	after	hour	ni ilio/c	ing com	
 	11	Pump test data: Well water was ft. after hours pumping gpt Est. Yield gpm: Well water was ft. after hours pumping gpt								
	.!		gpiii. Well water	Dublic	1L.	aller	nour	s pump	ing gpm	
	N		R TO BE USED AS: 5							
W 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Spe 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well								er (Specify below)		
			industrial / Domestic	(lawii & g	garden) (OMON	noring wen			
	N		1/1	1	l 4 - D	4 440	V N.	. 37	76 / 1 /	
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/da									If yes, mo/day/yrs	
S 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 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded										
1 St	eel	3 RMP (SR) 6	Asbestos-Cement	9 Other (specify be	elow)		Welde	ed	
(2) PV	VC	4 ABS 7	Fiberglass					Thread	ded X	
Blank casing diameter 2 in. to 3 ft., Dia in. to ft., Dia in. to ft.										
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 3 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.25 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 elet.										
SCREEN OR PERFORATION OPENINGS ARE: 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 3 ft. to 11 ft. From ft. to ft. From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 2 ft. to 11 ft. From ft. to ft. From ft. to ft. From ft. to ft.										
SCREEN-PERFORATED INTERVALS: From 3 ft to 11 ft From ft to ft										
			From	ft. to		ft. Fro	om	ft t	0 ft	
GRAVEL PACK INTERVALS: From 2 ft to 11 ft From ft to								o ft		
		OIL MATERIAL PROPERTY AND	From	ft to		ft Fro	om	ft t	o ft	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1ft										
0 GRO	UIWAIŁ	RIAL: I Neat cem	ent 2 Cement grout	(3 psento	onite (4 JOtner	Concrete: U-	111		
Grout Intervals From 1 ft. to 2 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 (1) Fuel storage 14 Abandoned water well below)										
		5 Cess pool er lines 6 Seepage p					mdoned water well/ gas well		below)	
1	from well?	101			feet? ~9		well/ gas well			
						V 11				
FROM	TO		OGIC LOG	FROM	TO		PLUGGIN	G INTI	ERVALS	
0	5	Gravel		ļ	ļ					
5	10	Black silty clay	- 41			-				
5 10	10	Brown clay with gray m Tan shale	ottiing		-					
10		Tan Suare			 			-		
 				 						
							· · · · · · · · · · · · · · · · · · ·			
						Flushmo	unt waiver from	BOW		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged										
under my jurisdiction and was completed on (mo/day/year) 12/15/10 and this record is true to the best of my knowledge and belief. This Woter Well Board and selection (mo/day/year) 1/26/11										
Kansas Water Well Contractor's License No. 757 under the business name of Larsen & Associates, Inc. This Water Well Record was completed on (mo/day/year) 1/26/11 by (signature)										
1						∇	CII	,		
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 Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Suite one to WATER WELL OWNER and retain one for										
vour records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.										