WAIL	K WELL	KECOKD	1.011	п и и с-	J DIV	ISION OF W	alei Kest	ources, App. 19	0.	
1	LOCATION OF WATER WELL: ounty: Sumner			NW /	NW //	Section N	lumber	Township	Number	Range Number R 1 W
Distance	and direction	on from nearest town	or city stre	et address o	f well if G	lohal Po	sitioning	System (dec	cimal degr	rees min of 4 digits)
Distance and direction from nearest town or city street address of well if located within city? 823 N. Jefferson Ave, Wellington KS  Clobal Positioning System (decimal degrees, min. of 4 digits)  Latitude: NA										
						Longitud	le: NA			
2 WATER WELL OWNER: Town & Country Markets RR#, St. Address, Box # : PO Box 17087  Elevation: NA Datum: NA										
RR#,	St. Address	, Box # : PO Box			Data Collection Method: NA					
City,	State, ZIP (	code : Wichita	KS 6/21/	TOTAL STATE	1 10 05					·
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 19.95 ft.										
LOCATON WITH AN "X" IN Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. SECTION BOX: WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr										
1		(N   Depth(s) Groun	dwater End	countered I			n. 2	;	π. 3	π.
SECT	TON BOX	:  WELL'S STAT	IC WATE	R LEVEL	ft	below la	and surfa	ice measured	on mo/d	ay/yr
	N	Pump	test data:	Well wate	r was	ft	. after	hou	rs pumpi	ng gpm
X		Est. Yield	gpm:	Well water	r was	ft	. after	hou	rs pumpi	ng gpm
-Ni	N	- WELL WATER								
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) (0) Monitoring well										
- sw se										
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs										
	S	Sample was sub	mitted	<i></i>		,	Water W	ell Disinfect	ed? Yes	No X
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										
5 TYPE	OF CASI	NG USED: 5	wrought II	ron	8 Concret	e tile	CAS	ING JOIN IS	: Glued	Clamped
St	eel	3 RMP (SR) 6	Asbestos-C	ement	9 Other (s	specify be	elow)		weide	a . ;
(2)PV	/C	4 ABS 7	Fiberglass						Threac	ied X
Blank cas	ing diamete	er 2 in to	<b>4.95</b> f	t., Dia	i	n. to	ft.,	Dia	in.	to ft.
PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 4.95 ft., Dia in. to ft., Dia in. to ft.  Casing height below land surface ft., Weight Ibs./ft. Wall thickness or gauge No.										
TYPE OF	SCREEN	OR PERFORATION	MATERIA	AT:						
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:										
SCREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot 3 Mill slot 5 Gauze wrapped 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From 4.95 ft. to 19.95 ft. From ft. to ft.  From ft. to ft.  GRAVEL PACK INTERVALS: From 3 ft. to 20.30 ft. From ft. to ft.  From ft. to ft.  From ft. to ft.  From ft. to ft.  From ft. to ft.										
2 LO	DEDECED SHU	TED DITERVALO.	To will	e wrappeu	o Saw (	∠uւ 10.05	10 Ouic	(specify)	A 4.	Δ
SCREEN	-PERFORA	TED INTERVALS.	From	4.95	11. 10	19.95	H. FR	om	II. II	'th
O.P.	ATTEN DA		From		п. ю		n. Fro	om	п. и	γπ.
GR	LA VEL PA	CK INTERVALS:	From	3	π. το	20.30	n. Fro	om	II. II	γπ.
			From		ft. to		ft. Fr	om	ft. to	)ft.
6 GROU	JT MATE	RIAL: 1 Neat cem	ent 2 Cer	ment grout	(3) Bento	nite (	4)Other	Concrete: 0	-1'	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1' Grout Intervals From 1 ft. to 3 ft. From ft. to ft. From ft. to ft.										
What is the nearest source of possible contamination:										
	tic tank	4 Lateral lin		ivv	10 Livesto	ck pens	13 Inse	cticide Stora	ge	16 Other (specify
	er lines	5 Cess pool						indoned wate		below)
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										
	from well?		,		How many				-	
			0010100				1	DILICOD	IC DITE	DIVALO
FROM	TO		OGIC LOC		FROM	TO		PLUGGIN	NGINIE	KVALS
9	9	Grass on top; Brow	n sitty cia	<u>y</u>		<del> </del>	<del> </del>			
9	20.30	Gray shale								
						<del>                                     </del>				
				2000	-					
			4.11/1							
							Flushn	nount waive	r from B	OW
		S OR LANDOWNE				ater well v	was (1) bo	ingressed (2)	reconstru	cted, or (3) plugged
		nd was completed on (n		4/2	21/14					nowledge and belief.
		tractor's License No					complete	on (mo/day/y	ear)	
		of Larsen & Assoc			by (signatu			1		
INSTRUCT	IONS: Please	fill in blanks or circle the	correct answer	ers. Send top	three copies to	Kansas De	partment (	Health and Er	vironment	Bureau of Water,
Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send 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.										