| WATEI | wei. | L RECORD | Form W | WC-5 | Division of Wate | er Resources App. N | o | | |
|--|--|---|--------------------|--|---|-------------------------|--------------|-----------------|--|
| | | OF WATER WELL: | | | Section Number | Township No. | Range | | |
| | ty: Seda | | NE 4NE 4 SE | 1/4 SW 1/4 | 19 | T 26 S | R 1 | ∠ E □W | |
| Street | /Rural A | dress of Well Location; | | Global Positioning System (GPS) information: | | | | | |
| from nearest town or intersection: If at owner's address, check here . | | | | | Latitude: (in decimal degrees) | | | | |
| | | | | | Longitude: (in decimal degrees) | | | | |
| · | | | | | Elevation: | | | | |
| A WATER WELL OWNED. | | | | | Datum: WGS 84, NAD 83, NAD 27 | | | | |
| 2 WATER WELL OWNER: Earl Mies RR#, Street Address, Box #: 1746 W. Driftwood Ct. | | | | | Collection Method: GPS unit (Make/Model:) | | | | |
| at a man a t | | | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | | |
| City, State, ZIP Code : Wichita, KS 67204 | | | | | Est. Accuracy: | <3 m, ☐ 3-5 m, ☐ | 5-15 m, |]>15 m | |
| 3 LOCATE WELL | | | | | | | | | |
| | H AN "X" | IN 4 DEPTH OF | COMPLETED WEL | L 30 | ft | | | | |
| SECT | TION BOX | OX: Depth(s) Groundwater Encountered (1).30 | | | | | | | |
| | N WELL'S STATIC WATER LEVEL. 8ft. below land surface measured on mo/day/yr | | | | | | | | |
| | Pump test data: Well water wasft. after hours pumping | | | | | | | | |
| - NIX | EST. YIELD. 18gpm. Well water was | | | | | | | | |
| w | w | | | | | | | | |
| │ | WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | |
| sv | Domestic Feedlot Oil field water supply Dewatering Other (Specify below) | | | | | | | | |
| | SW SE Domestic Feedlot Oil field water supply Dewaleting Oile (Specify below) Irrigation Industrial Domestic-lawn & garden Monitoring well | | | | | | | | |
| L | Was a chemical/bacteriological sample submitted to Department? Yes No | | | | | | | | |
| 1. | S If yes, mo/day/yr sample was submitted | | | | | | | | |
| Water well disinfected? ✓ Yes □ No | | | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | | | |
| CASIN | G JOINT | S: 🗹 Glued 🔲 Clar | nped Welded | ☐ Threade | i | | | | |
| Casing diameter .5. in. to .30. ft., Diameter in. to ft., Diameter in. to ft. | | | | | | | | | |
| Casing height above land surface | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify) | | | | | | | | | |
| Brass Galvanized Steel None used (open hole) | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole) | | | | | | | | | |
| □ Louvered shutter □ Key punched □ Wire wrapped ☑ Saw cut □ Other (specify) | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | ft. | | |
| From | | | | | | | | | |
| 6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other | | | | | | | | | |
| Grout Intervals: From 3 ft. to 20 ft., From ft. to ft., From ft. to ft., From ft. to ft., From ft. to ft. | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | |
| ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well | | | | | | | | below) | |
| | Notestich | | | ☐ Fuel storag ☐ Fertilizer s | | | | | |
| Direc | waterugu tion from | well East | n | | from well50' | as well | | | |
| FROM | TO | LITHOLOG | EIC I OG | FROM | | OG (cont.) or PLU | IGGING | NTERVALS | |
| 0 | 3 | Topsoil | | 1 ACOLVI | TO DITTOOL | C (Comm) Of a DC | | | |
| 3 | | Fine Sand | | | | | | | |
| 8 | | Medium Sand w/Clay I | avers | | | | | | |
| | | January - | | | | | i | | |
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| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed, ☐ reconstructed, or ☐ plugged | | | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) 04/29/2014 and this record is true to the best of my knowledge and belief. | | | | | | | | | |
| Kansas Water Well Contractor's License No238 This Water Well Record was completed on (mo/day/year) | | | | | | | | | |
| under the business name of Premier Pump & Well Service, Inc. by (signature) | | | | | | | | | |
| INSTRU | CTIONS: | Use typewriter or hall point per | PLEASE PRESS FIRML | Yand PRINT c | early. Please fill in blank | s and check the correct | t ans₩ers. S | end one copy to | |
| Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at | | | | | | | | | |
| http://www.kdheks.gov/waterwell/index.html | | | | | | | | | |