

# WATER WELL RECORD Form WWC-5

Division of Water  
Resources App. No.

IW-24

☒ Original Record ☐ Correction ☐ Change in Well Use

Well ID

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| <b>1 LOCATION OF WATER WELL:</b><br>County: <b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           | Fraction<br>SW 1/4 NE 1/4 SW 1/4 SW 1/4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Section Number<br><b>27</b>                                                                                                                                                                  | Township Number<br><b>T 26 S</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Range Number<br><b>R 1 E W</b>                  |
| <b>2 WELL OWNER:</b> Last Name: _____ First: _____<br>Business: <b>USD 259 School Services Center</b><br>Address: <b>3850 N. Hydraulic St.</b><br>City: <b>Wichita</b> State: <b>KS</b> ZIP: <b>67219</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 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: <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| <b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b><br>N<br><div style="border: 1px solid black; width: 100px; height: 100px; margin: 10px auto; position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black; border-style: dashed;"> <div style="position: absolute; top: 0; left: 0; width: 50%; height: 50%; border: 1px solid black;">NW</div> <div style="position: absolute; top: 0; right: 0; width: 50%; height: 50%; border: 1px solid black;">NE</div> <div style="position: absolute; bottom: 0; left: 0; width: 50%; height: 50%; border: 1px solid black;">SW</div> <div style="position: absolute; bottom: 0; right: 0; width: 50%; height: 50%; border: 1px solid black;">SE</div> </div> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;">X</div> </div><br>S<br><div style="text-align: center;">-----1 mile-----</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           | <b>4 DEPTH OF COMPLETED WELL:</b> ..... <b>30</b> ..... ft.<br>Depth(s) Groundwater Encountered: 1) ..... <b>22</b> ..... ft.<br>2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well<br>WELL'S STATIC WATER LEVEL: ..... <b>19.14</b> ..... ft.<br><input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <b>02/17/2016</b><br><input type="checkbox"/> above land surface, measured on (mo-day-yr) .....<br>Pump test data: Well water was ..... ft.<br>after ..... hours pumping ..... gpm<br>Well water was ..... ft.<br>after ..... hours pumping ..... gpm<br>Estimated Yield: ..... gpm<br>Bore Hole Diameter: ..... <b>3.6</b> ..... in. to ..... <b>30.2</b> ..... ft. and<br>..... in. to ..... ft. |                                                                                                                                                                                              | <b>5 Latitude:</b> ..... <b>37.754953</b> ..... (decimal degrees)<br><b>Longitude:</b> ..... <b>97.314961</b> ..... (decimal degrees)<br>Datum: <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27<br>Source for Latitude/Longitude:<br><input type="checkbox"/> GPS (unit make/model: .....)<br>(WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No)<br><input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map<br><input type="checkbox"/> Online Mapper: ..... |                                                 |
| <b>6 Elevation:</b> ..... <b>1331.99</b> ..... ft. <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC<br>Source: <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map<br><input type="checkbox"/> Other .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| <b>7 WELL WATER TO BE USED AS:</b><br><div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> 1. Domestic:<br/> <input type="checkbox"/> Household<br/> <input type="checkbox"/> Lawn &amp; Garden<br/> <input type="checkbox"/> Livestock<br/> 2. <input type="checkbox"/> Irrigation<br/> 3. <input type="checkbox"/> Feedlot<br/> 4. <input type="checkbox"/> Industrial </div> <div style="width: 33%;"> 5. <input type="checkbox"/> Public Water Supply: well ID .....<br/> 6. <input type="checkbox"/> Dewatering: how many wells? .....<br/> 7. <input type="checkbox"/> Aquifer Recharge: well ID .....<br/> 8. <input type="checkbox"/> Monitoring: well ID .....<br/> 9. Environmental Remediation: well ID <b>IW-24</b><br/> <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction<br/> <input type="checkbox"/> Recovery <input checked="" type="checkbox"/> Injection </div> <div style="width: 33%;"> 10. <input type="checkbox"/> Oil Field Water Supply: lease .....<br/> 11. Test Hole: well ID .....<br/> <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical<br/> 12. Geothermal: how many bores? .....<br/> a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical<br/> b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water<br/> 13. <input type="checkbox"/> Other (specify): ..... </div> </div>                                                                                                                                                                                                                                                                                                                                             |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| <b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded<br>Casing diameter ..... <b>1.5</b> ..... in. to ..... <b>20</b> ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.<br>Casing height above land surface ..... <b>0</b> ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. <b>40</b> .....<br><b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b><br><input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) .....<br><input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole)<br><b>SCREEN OR PERFORATION OPENINGS ARE:</b><br><input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) .....<br><input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole)<br><b>SCREEN-PERFORATED INTERVALS:</b> From ..... <b>20</b> ..... ft. to ..... <b>30</b> ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.<br><b>GRAVEL PACK INTERVALS:</b> From ..... <b>18</b> ..... ft. to ..... <b>30</b> ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| <b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other <b>Bentonite Cement (1-16')</b><br>Grout Intervals: From ..... <b>1</b> ..... ft. to ..... <b>16</b> ..... ft., From ..... <b>16</b> ..... ft. to ..... <b>18</b> ..... ft., From ..... ft. to ..... ft.<br><b>Nearest source of possible contamination:</b><br><input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage<br><input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well<br><input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well<br><input type="checkbox"/> Other (Specify) .....<br>Direction from well? ..... Distance from well? ..... ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| <b>10 FROM</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>TO</b> | <b>LITHOLOGIC LOG</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>FROM</b>                                                                                                                                                                                  | <b>TO</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>LITHO. LOG (cont.) or PLUGGING INTERVALS</b> |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 0.5       | Asphalt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| 0.5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 0.9       | Clay and Fill, fn sands                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| 0.9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 21.5      | Lean Clay, dk brn to grn gry to med brn                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| 21.5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 23.3      | Silty Clay, lt grn brn                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| 23.3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 24.3      | Silt, grn gry                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| 24.3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 28        | Silt and Wthrd Siltstone, lt rd brn                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| 28                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 30.2      | Wthrd to Fresh Siltstone, grn gry to blk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
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| <b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) <b>01/28/2016</b> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>531</b> ..... This Water Well Record was completed on (mo-day-year) <b>03/18/2016</b> ..... under the business name of <b>GSI Engineering, LLC</b> .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |
| Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.<br>KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.<br>Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> <span style="float: right;">KSA 82a-1212</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |

*Chalab*



**Legend**  

Well Location

Permeable Reactive Barrier (PRB)

**Notes:**  

1. Site features, property boundaries and well locations are approximate and are not of legal land survey.

2. Basemap source: Golder Associates, drawing titled: "Potentiometric Surface Elevation Map April 2013", dated August, 26, 2013, Figure Number 1, File No. 12384321, Revision 1 (Draft) and modified by Geosyntec in December 2014.

3. Imagery source: Esri, DigitalGlobe, GeoEye, Earthstar Geographics, CNES/Airbus DS, USDA, USGS, AEX, Getmapping, Aerogrid, IGN, IGP, swisstopo, and the GIS User Community.

4. Coordinate system is NAD83, KS South, State Plane Zone 1502, US Survey Foot format

| Location | Easting    | Northing   |
|----------|------------|------------|
| IW-12    | 1654956.71 | 1710758.11 |
| IW-13    | 1654939.73 | 1710760.41 |
| IW-14    | 1654927.02 | 1710760.08 |
| IW-15    | 1654923.79 | 1710742.45 |
| IW-16    | 1654904.99 | 1710740.19 |
| IW-17    | 1654875.60 | 1710700.21 |
| IW-18    | 1654883.78 | 1710720.26 |
| IW-19    | 1654864.15 | 1710720.65 |
| IW-20    | 1654883.46 | 1710739.54 |
| IW-21    | 1654885.60 | 1710759.52 |
| IW-22    | 1654906.96 | 1710759.64 |
| IW-23    | 1654902.25 | 1710779.25 |
| IW-24    | 1654921.84 | 1710779.29 |
| IW-25    | 1654941.56 | 1710781.08 |
| IW-26    | 1654961.82 | 1710778.26 |
| MW-28    | 1654846.54 | 1710677.86 |
| MW-29    | 1654564.13 | 1710579.36 |
| MW-30    | 1654564.26 | 1710541.52 |
| MW-31    | 1654564.64 | 1710500.84 |
| MW-32    | 1654565.31 | 1710451.32 |
| MW-33    | 1654769.45 | 1710692.46 |
| MW-34    | 1654723.11 | 1710550.71 |
| MW-35    | 1654932.63 | 1710755.43 |

150750150 Feet

Well Installation Locations

USD 259 School Service Center, Wichita, Kansas

Geosyntec<sup>®</sup>  
consultants

GuelphApril 2016

Figure

1