| WATER WELL RECORD Form WWC-5 Division of Water | | | | | | | | | | |
|---|---------------|---|--|---|--------------|--|---|---|---|--|
| | | Correction | | e in Well Use | Rese | ources App. No. | <u> </u> | Well ID | | |
| 1 LOCATION OF WATER WEL | | | L: | Fraction | | tion Number | Township Numb | er Rar | ige Number | |
| | r: SEDGWI | | | SE14 SE14 NW 14 | NE1/4 | | | | | |
| 2 WELL | OWNER: L | ast Name: VOI | N FANGE | First: DEANNA | Street or Ru | reet or Rural Address where well is located (if unknown, distance and | | | | |
| Business: | | | | | | direction from nearest town or intersection): If at owner's address, check here: | | | | |
| Address: 3629 N BURNS ST Address: | | | | | | | | | | |
| City: | WICHITA | | State: KS | ZIP: 67204 | | | | | | |
| 3 LOCATE WELL | | | | <u>.</u> - | | | | | | |
| WITH " | | | | PLETED WELL: | 24 | | | | | |
| SECTIO | N BOX: | | | Encountered: 1) | | Longitu | de: | <u></u> | (decimal degrees) | |
| 1 | 1 | | | rer level: | | | al Datum: WGS 8 | | 83 ⊔ NAD 27 | |
| | | below land surface, measured on (mo-day-yr).06/ | | | | Source to | r Latitude/Longitude (unit make/model: | : | , | |
| NW | X E | above la | and surface, | measured on (mo-day- | ýr) | | (WAAS enabled? | | | |
| | 1 | Pump test data: Well water was | | | | ☐ Land Survey ☐ Topographic Map | | | | |
| (w | E | after hours pumping | | | | Online Mapper: | | | | |
| sw | SE | Well water was | | | | | | | | |
| | 1 1 | Fertimated V | Estimated Yield:18±gpm | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | |
| | | Bore Hole D | Bore Hole Diameter: 10.5 in. to 50 ft. and | | | Source: Land Survey GPS Topographic Map | | | | |
| 1 n | nile | | in, to ft. | | | | Other | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | *************************************** | |
| Housel | | | 6. Dewatering: how many wells? | | | Test Hol | e: well ID | | ***** | |
| _ | | | | 7. Aquifer Recharge: well ID | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | |
| Livestock 8. Monitoring: well I | | | | | | | | | | |
| 2. ☐ Irrigation 9. Environmental Rem 3. ☐ Feedlot ☐ Air Sparge | | | | | | | | ontal Vertical Discharge Inj. of Water | | |
| 4. ☐ Industrial ☐ Recovery | | | | ☐ Soil Vapor Extraction h) Open Loop ☐ Surface ☐ Injection 13. ☐ Other (specify): | | | (suecity). | Jischarge II inj. 01 water | | |
| | | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted: | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | |
| Casing diameter 5 in to 50 ft Diameter in to ft Diameter in to 6 | | | | | | | | | | |
| Casing diameter 5 in to 50 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 12 in Weight 15 Weight 16 Wall thickness or gauge No. SDR-26 | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) | | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) | | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | |
| Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) | | | | | | | | | | |
| Louvered Shutter | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From 30 ft. to 50 ft., From ft. to ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 23 ft. to 50 ft., From ft. to ft., From ft. to ft. | | | | | | | | | | |
| | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From | | | | | | | | | | |
| | | e contaminati | | . IL., I'IOIII | 16. 10 | IL, TIOM | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| ☐ Septic | | | Lateral Line | s 🔲 Pit Privy | | Livestock Pens | ☐ Insection | cide Storage | : | |
| ☐ Sewer i | Lines | | Cess Pool | ☐ Sewage La | | Fuel Storage | | oned Water | | |
| ■ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | | |
| ☐ Other (Specify) Direction from well? NORTH Distance from well? 30 ft. | | | | | | | | | | |
| | | | | | | | THO. LOG (cont.) or | | CINTEDVALE | |
| 10 FROM 0 | TO | TOP SOIL | ITHOLOC | IIC LUG | FROM | TO LI | THO. LOG (CORL) OF | FLOGGIN | G IIVIER VALS | |
| | | CLAY | · · · · - | | + | - 1 | | | | |
| | | MED GRAVE | | | 1 | | | | | |
| | | SHALE | | | 1 | | | | | |
| 72 | 00 | /1 17LL | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Notes: | <u> </u> | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged | | | | | | | | | | |
| under my it | rrisdiction a | nd was compl | eted on (m | o-dav-vear) 96/96/2 | 0.17 and | this record is t | rue to the best of m | v knowled | ge and belief. | |
| Kansas Wa | ter Well Cor | tractor's Lice | ense No. 💆 | 84 This Wa | ter Well Red | ord was comp | eted on (mo day-y | ear) Q6/Q7 | /2017 | |
| under the b | usiness name | ot XX⊏NIN | S 00 for | LING LLC | Si | gnature | den Commont | otom CUTTO | Castian | |
| Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau 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.kdhcks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015 | | | | | | | | | | |