| WATER WELL R | | WWC-5 | | sion of Water | | VIM-SVE-3 |
|---|---|----------------------------|--|---|--|---------------------------------------|
| Original Record | | e in Well Use | | irces App. No. | | Well ID |
| 1 LOCATION OF W County: Sedgwick | | Fraction NW1/4 SW1/4 SW1/4 | SE 1/4 | ion Number 28 | Township Number T 26 S | R 1 ■E□W |
| 2 WELL OWNER: Le Business: City of Wid | | | Street or Rural Address where well is located (if unknown, distance and lirection from nearest town or intersection): If at owner's address, check here: | | | |
| Address: 1900 E. 9th Street | | | | | | |
| Address: City: Wichita State: KS ZIP: 67214 | | | 2011 IV Offic. Waste Confections | | | |
| 2 LOCATE WELL | | | | T | 644 722074 | |
| WITH "X" IN | A DEPTH OF TRACE WITH WITH WITH A LOT A CONTROL OF THE CONTROL OF | | | | | |
| SECTION BOX: | | Encountered: 1) | | Longitud | ie: -97.32011 | ∠(decimal degrees) □ NAD 83 □ NAD 27 |
| N N | WELL'S STATIC WA | | | r Latitude/Longitude: | LINAD 63 LINAD 27 | |
| below land surface, measured on (mo-day-yr) | | | | GPS (unit make/model:) | | |
| NW NE | | | | (WAAS enabled? ☐ Yes ☐ No) | | |
| W E | Pump test data: Well water was | | | ☐ Land Survey ☐ Topographic Map ☐ Online Mapper: | | |
| | | vater was ft | | | ie Mapper | |
| SW SE | after hours pumping gpm | | | 6 Floreties | ъ. 1310 е п | Ground Level ☐ TOC |
| | S Estimated Yield:gpm Bore Hole Diameter: .19in. to | | | | | S Topographic Map |
| mile | in. to ft. | | | | Other Google Eart | h |
| 7 WELL WATER TO BE USED AS: | | | | | | |
| 1. Domestic: | | iter Supply: well ID | | | | e |
| Household | 6. Dewatering: how many wells? | | | 11. Test Hole: well ID | | |
| ☐ Lawn & Garden ☐ Livestock | 7. Aquifer Recharge: well ID. NIM-SVE-3 | | | ☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores? | | |
| 2. Irrigation | | al Remediation: well ID | | a) Closed Loop Horizontal Vertical | | |
| 3. ☐ Feedlot | ☐ Air Sparge ☐ Soil Vapor Extraction | | | b) Open Loop Surface Discharge Inj. of Water | | |
| 4. Industrial Recovery Injection 13. Other (specify): | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted: | | | | | | |
| Water well disinfected? ☐ Yes ■ No | | | | | | |
| 8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other | | | | | | |
| Casing diameter 4 in to 6 ft., Diameter in to ft. Diameter in to ft. Casing height above land surface Weight Bs./ft. Wall thickness or gauge No. Sch. 40. | | | | | | |
| 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 | | | | | | |
| ☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | |
| SCREEN-PERFORATED INTERVALS: From .6 ft. to .13 ft., From ft., From ft., From ft. to ft. | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | |
| 9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other | | | | | | |
| Grout Intervals: From O. ft. to 4. ft., From ft. to ft., From ft. to ft. Nearest source of possible contamination: | | | | | | |
| Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage | | | | | | |
| ☐ Sewer Lines | Cess Pool | ☐ Sewage Lag | _ | uel Storage | _ | ed Water Well |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | |
| Direction from well? ft. | | | | | | |
| 10 FROM TO | LITHOLO | | FROM | | | LUGGING INTERVALS |
| | Gravel | | 1 1 | | | |
| | Clay, dark brown, moi | | | | | |
| 5 13 C | Clay, brown, firm, moi | st, sandy | | | | |
| | | | | | | |
| | | | | | ······································ | |
| | · · · · · · · · · · · · · · · · · · · | | Notes: | | | |
| Trucs. | | | | | | |
| | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) 3-18-2020 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 604 This Water Well Record was completed on (mo-day-year) 5.15.120 | | | | | | |
| under the business name | of Environmental P | riority Service. Inc. | Sio | nature 2 | the MA |).54.75.4.50 |
| under the business name of Environmental Priority Service, Inc. Signature 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.kdheks.gov/waterwell index.html KSA 82a-1212 Revised 7/10/2015 | | | | | | |