GSI Job No. 097412         SVE-2           WATER WELL RECORD         Form WWC-5         KSA 82a-1212         ID No														VE-2		
E4 LOCATIO	ON OF WATE	D WELL:	Te	raction	VATER WELL	RECORI	D For	TI VV VV		n Number					ge Numb	
					ALC:		NIE-				1	wnship Nu		1	•	
County:	Sedo d direction from	gwick				1/4		1/4	12	8	Т	27	<u>s</u>	R	1	E
	a direction troi Broadway,			city stree	et address of	well it lo	cated wi	thin c	ty?							
	WELL OWNE			ichita												
					MC 4 42						_					
	dress, Box #											•		vision of Wa	ater Res	ources
City, State, ZIP Code : Wichita, KS 67202 Application Number:																
3 AN "X" I	N SECTION B	OX:	''''' 4	DEPTH (	OF COMPLE	TED WE	1.1		20	ft FLF	VATION:					
<b>*</b> * * * * * * * * * * * * * * * * * *	1	i x		DEPTH OF COMPLETED WELL  Depth(s) Groundwater Encountered 1 15 ft. 2									ft	3		<del></del>
	1	- 1			ATIC WATE											
	NW	- NE														
₩ W		-	E Fst		Pump test da											
÷ "   -	i	-		. Yield	gr	m: We	II water v	was			ft. after _		hours	pumping		gpm
Bore Hole Diameter 10 in. to 20 ft. a WELL WATER TO BE USED AS: 5 Public water supply									ft. and		i	n. to		ft.		
<b> </b>   -	Sw <b>1</b>	- SE	I VVE	LL WAI	EKIOBEU	SED AS:	5 Pu	DIIC W	ater sup	opiy	8 AI	r condition	iing	11 Injection	n well (Casaifu	halaw
l↓ L		!		1 Dom 2 Irriga	estic 3 Fe	eed lot	5 Oil	field '	water si	upply en (domesti	9 D	ewatering	woll .	Soil Van	or Extra	ction
	S		\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	•	::::::::::::::::::::::::::::::::::::::	uusiilai	/ La	WII all	u yarue		V	vioriitoring	wen	Son Vapi		CHOIL
			- 1		ical/bacterio	logical sa	ampie st	ibmitti	ea to De							was
<u>-                                    </u>				mitted			<del></del>									-
	F BLANK CAS									te tile		SING JOIN	TS: Glu	ed	Clampe	d
	eel				6 A	sbestos-(	Cement	9	Other (s	specify belo	ow)		Wel			
2 PV		4 AE			7 Fi	berglass						<b>L</b>	Threa	aded	Flus	h
Blank casin	g diameter	4	in.	to	10	t., Dia								in. to		ft.
Casing heig	ht above land	surface		0	in wei	aht	0	.703		lbs./ft.	Wall thic	ckness or o	auge No	. S	CH. 4	.0
	CREEN OR P					J			7 F	PVC		10 Asbe	stos-cem	ent		
1 Ste					5 Fi	herglass				RMP (SR)		4		·)		
2 Bra					6 C					ABS		12 None	used (or	pen hole)		
	R PERFORAT										8 Sa			11 None	e (open i	hole)
1 Co	ntinuous slot		3 Mill	slot			Wire w					lled holes				
E	uvered shutter				·		Torch (				10 Otl	ner (speci	fv)			
	ERFORATED		,		10					ft	From	. (	ft	to		ft
	+															
GP	AVEL PACK II	NTED\/AI		From	8	ft to		,	20	ft,	From		· · · · · · · · · · · · · · · · · · ·	to		f.
	AVEL PACK II	NILKVAL														
6						π. ια	)			ft.	From		π.	to		ft.
	MATERIAL:															
Grout Interv	als From	3	ft. to	·	<b>8</b> ft.	From			ft. to		ft	From _		ft. to		ft.
What is the	nearest sourc	e of possi	ble conta	aminatior	1:					10 Lives	-	S	14 A	bandoned	water we	ell l
1	ptic tank			Lateral li			it privy			11 Fuel	•			il well/ Gas		
2 Se	wer lines		5	Cess po	ol	8 S	Sewage I	agoor	1	12 Ferti		•	16 O	ther (speci	fy below	)
1	itertight sewer	lines	6	Seepage	e pit	9 F	eedyard			13 Inse		orage				
Direction fro			r							How many	y feet?					
FROM	то	CODE	Class		HOLOGIC I			FI	ROM	то		PLU	IGGING	INTERVAL	.S	
0.0	3.0	CL			own to bro	wn, som	e fine									
0.0	3.0	- CL			ined sand light browr	. vorv fi	no to	$\vdash$			-					
3.0	5.0	<b>SM</b>	fine gra		iignt brown	i, very ii	ne to									
5.0	6.0	CL		gray, si	ltv			+								
0.0	0.0				gray, very	fine to fi	ne	+								
6.0	8.0	SM	graine		gy, y											
8.0	12.5	CL			ith very fin	e sand										
					rown to gra		um to									
12.5	20.0	SP	coarse	grained	1											
7 CONTR	ACTOR'S OR	LANDOV	VNER'S			nis water	well was	(1) c	onstruct	ed, (2) rec	onstructe	d, or (3) plu	igged und	der my juris	diction a	nd was
completed of	on (mo/day/yr)			0	1/13/10				and this	s record is	true to the	e best of m	y knowle	edge and b	elief. Ka	insas
Water Well	Contractor's L	icense N	٥.		531				This W	ater Well R	Record wa	s complet	ed on (m	o/day/yr)	01/2	8/10
1	usiness name		G	eotech	nnical Se	rvices	Inc.			(signature)	// //	14				

er the business name of Geotechnical Services Inc. by (signature) by (signature) INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.