								,	
mw-1		**************************************	www.ioin			S. Carlos Marcos			
WATER WEL		Form W	WC-5	Division of Section Num		Resources App. Township No.		Number	
County: Sed	OF WATER WELL:	Fraction 1/4 NW 1/4 SW	1 1/4 NW 1/4			T 27 S	R 1	ZE DW	
Street/Rural A	ddress of Well Location;				ioning S	System (GPS)			
from nearest to	own or intersection: If at	owner's address, chec	k here 🔲.	Latitude:1	686654	.44	(in de	cimal degrees)	
240 N. Broadway, near sw corner of building					Longitude: 1649306.55 (in decimal degrees)				
	••	· · · · · · · · · · · · · · · · · · ·		Elevation:	WGS 84	□ NAD 83	 □ NAD 27		
2 WATER WELL OWNER: Kiser, Inc.					Datum: WGS 84, NAD 83, NAD 27 Collection Method:				
RR#, Street Address, Box #: 1646 Glasgow Street				GPS unit (Make/Model:)					
City, State, Z	P Code : Wichita	, Ks. 67206		☐ Digital Map/Photo, ☐ Topographic Map, ☑ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m					
3 LOCATE WEI			 			**** <u>L.J. S. S. 3132</u>			
WITH AN "X"	IN 4 DEPTH OF	COMPLETED WEL	д 25	*********	ft.		(3)		
SECTION BOX: Depth(s) Groundwater Encountered (1).14.8 ft. (2)									
1.A	WELL'S STAT	test data: Well water	II ar mac	below land st	irrace m	easured on mo	/day/yr mning	gnm	
		gpm. Well water	er was	ft. after.		hours pu	mping	gpm	
w x-NWNI	B Bore Hole Dian	neter 8.25 in. to .		ft., and	in. t	0	ft.		
	WELL WATER	TO BE USED AS: [☐ Public wa	ter supply	Geo	thermal [Injection	well	
sw sı	E Domestic	☐ Feedlot ☐	Oil field wat	er supply	Dev	vatering L	J Other (Sp	becity below)	
	☐ Irrigation	☐ Industrial ☐ /bacteriological sampl	e submitted to	wn & garden Denartment?	MOI A	es VI No		******	
S	If ves. mo	/day/yr sample was su	bmitted	o Dopuranoire.	* لسا 				
1 mile		nfected? 🗌 Yes 📝							
5 TYPE OF CA	SING USED: Stee	el 🗹 PVC 🗆	Other	************				i i qua por disenso di superimento di colo	
CASING JOINT	S: Glued Cla	mped Welded	✓ Threade	d					
Casing diamet	er .2 in. to .15.	ft., Diameter.	in.	to	ft., Dia	ameter	in. to .	ft.	
Casing height	above land surface0	in., Weigh	it	lbs./ft., W	all thick	mess or gauge	No\$90.		
TYPE OF SCRE	EEN OR PERFORATION Stainless Steel	MATERIAL:	r	Other (Specify	A		<i>(</i>		
☐ Brass	Galvanized Steel	None used (open	hole)	7 CANAT (W.F. A. A.)	, ,				
	ERFORATION OPENIN	GS ARE:	C mount of		1 1	Nine Comment	1		
Continuo	bus slot Mill slot	Gauze wrapped	Saw cut	Drilled ho	nes pecify)	None (open	1016)		
SCREEN-PERF	ORATED INTERVALS:	From15	ft. to25	ft., I	From \dots		t. to		
		From	ft to	ft l	From		ft. to	f	
GRAV	EL PACK INTERVALS:	From12.5	. ft. to25	ft.,	From	*********	ft. to		
Z 000000000000000000000000000000000000	THE TAX TO A	From	t 17 Pente		erom		п. то		
Grout Intervals:	TERIAL: Neat cen	o 12.5 ft Fro	m Tr Kideim	ft to	ft	From	ft. to .		
What is the near	est source of possible con	tamination:			,,,,,,				
☐ Septic ta	nk 🔲 Lateral l	ines Pit privy	☐ Livestock		secticide		Other (speci	fy below)	
Sewer lin	nes	Sewage lagoon	Fuel stora Fertilizer		oandoned I well/gas	water well		·	
	m well			from well	-				
FROM TO	LITHOLO		FROM			G (cont.) or P			
0 1	concrete						*****		
1 7	clav					<u></u>		and the second s	
7 15	sand, brown, fine to n	***************************************						<u> </u>	
15 19.5	sand, brown, fine to c						againe air air an		
19.5 25	sand, gray fuel stain, coarse, petroleum od	**************************************				<u>ica, e.a., and an announced photosoprophological brinds of blacks.</u>		<u></u>	
	coarse, petroleum ou	01 31 60 61			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
								, , , , , , , , , , , , , , , , , , ,	
								· · · · · · · · · · · · · · · · · · ·	
								11	
7 CONTRACT	OR'S OR LANDOWNI	R'S CERTIFICATI	ON: This wa	ter well was 🗸	constru	icted, [] reco	istructed, o	r [] plugged	
under my jurisdi	iction and was completed Vell Contractor's License	on (mo/day/year) .1.40	Water Wall	ina this record Record was co	is true t	on (mo/day/y	ear) 1/10	Li H	
under the busine	es name of Environme	ntal Priority Service	inc	by (signat	ure) .J.v.	かん A.M. た	فالمعاج والمتعاشين	<i>,</i> 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
INSTRUCTIONS	Use typewriter or hall point r	en PLEASE PRESS FIRM	LY and PRINT	clearly. Please fill	in blanks	and check the cor	rect answers.	Send one copy	
Kansas D	epartment of Health and Environment of Health and Environment of Health and Environment of the H	nment, Bureau of Water, G	eology Section,	1000 SW Jackson r records. Includ	n St., Suite le fee of \$	e 420, Topeka, Ki 5.00 for each com	insas 66612-1 tructed well.	Visit us at	
rerephone 703-29	o-coes. Send one copy to WA	http://www.kdhake.c							

http://www.kdheks.gov/waterwell/index.html