

WATER WELL RECORD

Form WWC-5

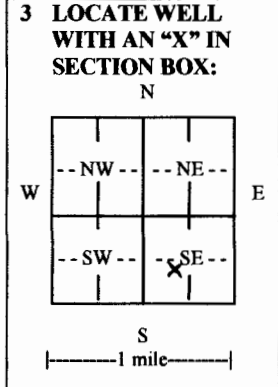
Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Sedgwick	Fraction ¼ NE ¼ SW ¼ SE ¼	Section Number 22	Township No. T 27 S	Range Number R 1 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .
Former Mikes Cleaners
2910 East Douglas, Wichita, KS 67203

Global Positioning System (GPS) information:
Latitude: .37.40'.51.51205" (in decimal degrees)
Longitude: 97.18'.16.82797" (in decimal degrees)
Elevation: 1295.70
Datum: WGS 84, NAD 83, NAD 27
Collection Method:
 GPS unit (Make/Model:)
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m

2 WATER WELL OWNER: KDHE-BER
RR#, Street Address, Box #: 1000 SW Jackson St., Ste 410
City, State, ZIP Code : Topeka, KS 66612



4 DEPTH OF COMPLETED WELL 31..... ft.
Depth(s) Groundwater Encountered (1) 18..... ft. (2) N/A..... ft. (3) N/A..... ft.
WELL'S STATIC WATER LEVEL 18..... ft. below land surface measured on mo/day/yr. 3-5-2014.....
Pump test data: Well water was N/A..... ft. after N/A..... hours pumping. N/A..... gpm
EST. YIELD N/A..... gpm. Well water was N/A..... ft. after N/A..... hours pumping. N/A..... gpm
Bore Hole Diameter 8.25..... in. to 31..... ft., and N/A..... in. to N/A..... ft.
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below)
 Irrigation Industrial Domestic-lawn & garden Monitoring well MW-5
Was a chemical/bacteriological sample submitted to Department? Yes No
If yes, mo/day/yr sample was submitted. N/A.....
Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel PVC Other.....
CASING JOINTS: Glued Clamped Welded Threaded
Casing diameter .2..... in. to .16..... ft., Diameter N/A..... in. to N/A..... ft., Diameter N/A..... in. to N/A..... ft.
Casing height above land surface .0..... in., Weight N/A..... lbs./ft., Wall thickness or gauge No. Schedule 40.....
TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel PVC Other (Specify).....
 Brass Galvanized Steel None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
 Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify).....
SCREEN-PERFORATED INTERVALS: From .16..... ft. to .31..... ft., From N/A..... ft. to N/A..... ft.
From N/A..... ft. to N/A..... ft., From N/A..... ft. to N/A..... ft.
GRAVEL PACK INTERVALS: From .14..... ft. to .31..... ft., From N/A..... ft. to N/A..... ft.
From N/A..... ft. to N/A..... ft., From N/A..... ft. to N/A..... ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete 0-2 feet
Grout Intervals: From 2..... ft. to 14..... ft., From N/A..... ft. to N/A..... ft., From N/A..... ft. to N/A..... ft.
What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well Chlorinated Solvents
Direction from well Distance from well

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1.5	Grass, roots silty clay dk brown moist med stiff plastic	14.5	18.0	Sand med to coarse slightly moist
1.5	5.0	Silty clay lt brown moist stiff plastic	18.0	20.5	Sand, coarse to very coarse w/ small pebbles and gravel saturated
5.0	8.0	clayey silt lt brown stly moist med stiff trace plasticity	28.5	31.0	Very weathered shale dk blue-gray slightly moist very stiff angular blocky.
8.0	11.0	silty clay lt brown moist med stiff highly plastic.			
11.0	14.5	Clay dk brown slightly moist very stiff highly plastic			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 3-5-2014..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 759..... This Water Well Record was completed on (mo/day/year) 4-20-2014..... under the business name of RAZEK Environmental, LLC..... by (signature).....

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>