

WATER WELL RECORD

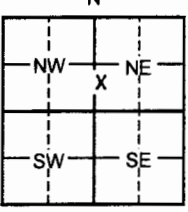
Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:	Fraction <u>NW ¼ SW ¼ NE ¼</u>	Section Number <u>4</u>	Township Number <u>T 27 S</u>	Range Number <u>R 1 E</u>
County: <u>Sedgwick</u>				

Distance and direction from nearest town or city street address of well if located within city? 2745 N Ohio, Wichita KS **Global Positioning System** (decimal degrees, min. of 4 digits)
 Latitude: N 37.73238°
 Longitude: W 97.32536°

2 WATER WELL OWNER: <u>Waste Connections of Kansas, Inc.</u>	Elevation: <u>RIM: 1314.92; TOC: 1314.53</u>
RR#, St. Address, Box # : <u>2745 N. Ohio St.</u>	Datum: <u>WGS84</u>
City, State, ZIP Code : <u>Wichita KS 67219</u>	Data Collection Method: <u>legal survey</u>

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>19.38</u> ft.
	Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft. ft. WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: <input type="checkbox"/> 5 Public water supply <input type="checkbox"/> 8 Air conditioning <input type="checkbox"/> 11 Injection well <input type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feed lot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below) <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Domestic (lawn & garden) <input checked="" type="checkbox"/> 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>

5 TYPE OF CASING USED:	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 9 Other (specify below) _____
<input checked="" type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 7 Fiberglass	<input type="checkbox"/> Welded _____
Blank casing diameter <u>2</u> in. to <u>4.38</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		<input type="checkbox"/> Threaded <input checked="" type="checkbox"/> X	
Casing height below land surface _____ ft., Weight _____ lbs./ft.		Wall thickness or gauge No. _____	

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 4.38 ft. to 19.38 ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 3 ft. to 19.80 ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other **Concrete: 0-1'**

Grout Intervals From 1 ft. to 4.35 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well

Direction from well? W How many feet? ~90'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.3	Asphalt			
0.3	10	Black silty clay			
10	15	Fine gray sandy clay			
15	19.8	Coarse sand			
Flushmount waiver from BOW					

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7/10/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 7/19/14 under the business name of Larsen & Associates, Inc. by (signature) _____

INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell>.

TRITERRA

LAND SERVICES

~~VCS Copy~~

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**SURVEYING OF ADDITIONAL MONITORING WELLS
 WASTE CONNECTIONS OF KANSAS, INC.
 WICHITA, KANSAS**

The above site is located in Section 4, Township 27 South, Range 1 East of the Sixth Principal Meridian, Sedgwick County, Kansas. The Southeast corner of Section 4 was assigned coordinates of 00.00 North and 00.00 West.

The vertical control was the control point established during the previous survey, described as a chiseled 'X' on the northeast corner of a storm drain box located at the southwest corner of the property.

The Latitude and Longitude were recorded from a GPS unit. The site is located on the 7.5' quad map titled "Wichita East".

ID	NORTH	WEST	LATITUDE	LONGITUDE	ELEVATION
SE CORNER 4-27S-1E	00.00	00.00			
CP	3440.89	2636.96	37.73213	97.32635	1311.74
MW-7 SW NW SW NE	3533.40	2340.87	37.73238	97.32536	RIM 1314.92 TOC 1314.53
MW-8 SW NW SW NE	3456.96	2395.83	37.73219	97.32553	RIM 1312.99 TOC 1312.74

