WATER	WELL R	RECORD		WWC-5		ivision of Wate				
		Correction		e in Well Use		sources App. N		Well ID		
1 LOCATION OF WATER WELL:			Fraction	S	ection Number			ige Number		
County	: Sedgwick	(14 SW 14 NE 1						
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and										
	City of Wi				direction from nearest town or intersection): If at owner's address, check h					
Address:	1900 E. 9	th Street			NW comer of Kinkaid & Mead					
Address:					NVV come	r of Kinkald a	k iviead			
City:	Wichita		State: KS	ZIP: 67214						
3 LOCAT		4 DEPTI	TOF COM	IPLETED WELL:	26.0	ft 5 Tatitu	ide: 37.65350	00	(decimal degrees)	
WITH "	X" IN	Denth(s) C		Encountered: 1)1	9.5 ↔	I. J Laute	tude: -97.329	138	(decimal degrees)	
SECTIO	N BOX:			3) ft., or 4)			ontal Datum: WGS 8			
l N	Į.	WEII'S S	TATIC WA	TER LEVEL:	MA H		for Latitude/Longitude		03 LI NAD 21	
			below land surface, measured on (mo-day-yr)				PS (unit make/model:		,	
'			above land surface, measured on (mo-day-yr)				(WAAS enabled?			
NW	NE		Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map			
w	E		after hours pumping gpm				Online Mapper:			
1 1 1	1 1	1	Well water was ft.							
SW	SE	after	after hours pumping gpm			CEL C NA OFFICE				
Estimated Yield			Yield:	gpm		6 Eleva	6 Elevation: NA			
	Estimated Yield: S Bore Hole Diameter:			3.25 in to 26.0	26.0 ft. and Source: Land S					
1 n	nile			in. to	ft.		Other			
7 WELL WATER TO BE USED AS:										
1. Domestic:		5. [☐ Public Wa	ater Supply: well ID			l Field Water Supply: le	ease		
☐ Housel	☐ Household 6. ☐ Dewatering:				*******	. 11. Test I	11. Test Hole: well ID			
☐ Lawn & Garden 7. ☐ Aquifer Re				echarge: well ID	well ID Cased Uncased					
☐ Livesto	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID									
2. Irrigati	2. ☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop _ Horizontal Uvertical			
3. Feedlo				e □ Soil Vapor	Extraction		oen Loop 🔲 Surface Di			
4. 🔲 Industr	rial		☐ Recovery	☐ Injection		13. 🔲 Ot	her (specify):	• • • • • • • • • • • • • • • • • • • •		
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:										
Water well disinfected? T Yes No										
8 TVPE OF CASING HSFD: ☐ Steel ■ PVC ☐ Other CASING IOINTS: ☐ Glued ☐ Clarmed ☐ Welded ■ Threaded										
Casing diameter 1 in to 16 ft Diameter in to ft Diameter in to ft										
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other										
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 Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)										
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From 16.0 ft. to 26.0 ft., From ft., From ft., From ft.										
GRAVEL PACK INTERVALS: From 14 ft. to 26 ft., From ft. to ft., From ft. to ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
Nearest source of possible contamination: Septic Tank										
☐ Sewer			Cess Pool	☐ Sewage L		☐ Fuel Storage		oned Water		
Sewel Lines Cess Foot Sewage Lagoon Fuel Storage Notationed Water Well Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well										
										
Direction from well?										
10 FROM	то		LITHOLO		FROM		LITHO. LOG (cont.) or		G INTERVALS	
		Sand, fine,								
6		Sand, fine t		* ***********						
	00						· · · · · · · · · · · · · · · · ·			
					1	1				
					1	1	•			
					 	+				
					Notes:					
	1701.5									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged										
under my jurisdiction and was completed on (mo-day-year) 3-29-2017 and this record is true to the best of my knowledge and belief.										
Kanaga Wia	misuiciion 8 ter Well Ca	ntractor's T	picicu dii (îi	110-uay-ycai) .Y47.7 304 Thic V	ater Well Dا	ecord was con	s true to the best of hi apleted on (mo-day-y	ear) 6	7,2/17	
under the b	ucinece nam	ndacion S Ele	nmental P	riority Service. Inc	awi wen N	Sionature	L.L. M.L.	ош ут. ,	······ / ······	
Mail	1 white conv al	ong with a fee o	f \$5.00 for ea	ch constructed well to: K	ansas Departme	ent of Health and	Environment, Bureau of W	ater, 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.kdhcks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										