County: Fraction:	= A/W Sec. 28 T 2/ S R / E
CORRECTION(S) TO WATER WELL COMPLETION RECO	ORD (WWC-5) - to rectify lacking or incorrect information
Owner: Lonnie Hepner	
If corrected, location was listed as:	Location changed to:
Section-Township-Range:	
Fraction (1/4 1/4 1/4):	
Other changes: Initial statements: Latitude: 8577.92,	Longitude: 2244.42, NAD 83,
Changed to: Latitude: 37.674219, Longit	ude:-97.32650/, WG584
Comments:	·
Verification method: Wellsite address, attached given by Google Earth, KGS' LEOWEB' & Earth photos on KGS website Submitted by: Kansas Geological Survey, Data Resources Library, 19 Kansas Dept. of Health & Environment, Bureau of Wa	Initials: DRA Date: 12/20/2017 On Constant Avenue, Lawrence, KS 66047-3724 Ster, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

(2017/09/11)

Docarion Or WATER WELL: Fraction Sel. Nel / Sel. /	WATER WELL R			WWC-5		ision of Water			MW15	
Country SEDGWICK SEW, NEW, SEW, NOW, 28 T 27 S R 0 ■ E WELL OWNNER; Law Name HEPNER Free CONNIE Busines: Address: 1002 S, WASHINGTON State: KS ZP 67216 1011 WASHINGTON AVE. Makes MCHITA State: KS ZP 67216 1011 WASHINGTON AVE. SET 1011 WASHINGTON AVE. SET 1012 WASHINGTON AVE. SET								Well ID		
Surrect or Kurral Address where well is located (if unknown, disunce and business: Address: 1002 S. WASHINGTON Address: More well is located (if unknown, disunce and discussed in the content of the			L:		1 -					
Businest Address: 1002 S. WASHINGTON Address: 1002 S. WASHINGTON Sase: KS ZIP-67218										
Address: 1002 S. WASHINGTON Address: 0002 S. WASHINGTON Address: 0002 S. WASHINGTON Address: 0002 S. WASHINGTON 3 LOCATE WELL VOLUME AND ADDRESS AS LOCATE WELL VOLUME AND ADDRESS AS LOCATE WELL VOLUME AND ADDRESS AS LOCATE AND ADDRESS AS LOCA	1	ast Name: HEF	NEK	First: LONNIE						
Address: CISY: WICHITA 3 LOCATE WELL. WITH ST N SECTION BON: N SE	1	/ASHINGTO	N				,	r's address,	eneck nere:	
3 LOCATE WELL WITH = VIN SECTION BOX: No. 2 15 15 15 15 15 15 15 15 15 15 15 16 16 17 17 17 18										
SECTION BOX: N Dephts) Groundwater Encountered: 1, 15, w. t.	City: WICHITA		State: KS	ZIP: 67216				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
Depth(s) (Froundwaler Encountered: 1) 5		4 DEPTH	OF CON	APLETED WELL:	25 ft	5 Latitud	8577.9	2	(decimal degrees)	
2		Depth(s) Gro	oundwater	Encountered: 1)1	5 ft.					
WELL'S STATIC WATER LEVEL 5.15. ft.		2)	ft.	3) ft., or 4) [Dry Well					
Another in the state will water was from the state water water was from the state water water was from the state water water was from the state water was from the state was from the state water was from the st		WELL'S ST	ATIC WA	TER LEVEL:15.	15 ft.	Source				
Pump test data: Well water was										
after	NW - _x NE						(WAAS enabled? ☐ Yes ☐ No)			
Well water was ft after hours pumping gpm Stimated Yield: gpm Stimated Y						Lar	id Survey ∐ Topogr	aphic Map		
after		atter					ine Mapper:			
S	SW SE	after				(Pl)	1203.26			
TWELL WATER TO BE USED AS: 1. Domestic:										
TWELL WATER TO BE USED AS: 1. Domestic: 5 Public Water Supply: well ID 10 Oil Field Water Supply: lease 1. Domestic: 1. Domestic: 5 Public Water Supply: well ID 1. Test Hole: well ID	-					Source:				
1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 1. Leavn & Garden 7. Aquifer Recharge: well ID 1. Cased Uncased Geotechnical Livestock 8. Monitoring: well ID WW15. 12. Gased Uncased Geotechnical Uncased Geotechnical Livestock 8. Monitoring: well ID WW15. 12. Geothermal: how many bores? 3. Feedlot As Pagre Soil Vapor Extraction 9. Environmental Remediation: well ID 3. Other (specify) Surface Discharge Inj. of Water 13. Other (specify) Surface Discharge Inj. of Water 13. Other (specify) Surface Discharge Inj. of Water 13. Other (specify) Surface Discharge Inj. of Water Water well dissinfected? Yes No If yes, date sample was submitted: Water well dissinfected? Yes No If yes, date sample was submitted: Water well dissinfected? Yes No If yes, date sample was submitted: Water well dissinfected? Yes No If yes, date sample was submitted: Water well dissinfected? Yes No If yes, date sample was submitted: Water well dissinfected? Yes No If yes, date sample was submitted: Water well and surface No Inj. of Water Inj. of Wat				in. to	tt.		Oulei			
Household 6. Dewatering; how many wells? 11. Test Hole: well ID Cased Uncased Geotechnical Livestock 8. Monitoring; well ID MW15 12. Geothermal: how many bores? 3. Closed Loop Horizontal Vertical 3. Feedbat Air Sparge Soil Vapor Extraction 3. Other (specify) Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water 13. Other (specify) MW35 Air Sparge Soil Vapor Extraction 13. Other (specify) MW35 Air Sparge Soil Vapor Extraction MW36 Air Sparge Inj. of Water Air Sparge Inj. of Water Air Sparge Inj. of Water MW36 Air Sparge Inj. of Water Air Sparge Inj. of Water	I .					10 🗆 0:1:	C:-14 W-+ C1 1			
Lawn & Garden 7. Aquifer Recharge: well ID MW15 12. Gothermal: how many bores?	1					10. 🔲 OII	rieid water Supply: 10	ease		
2. Irrigation 9. Environmental Remediation: well ID a) Closed Loop Horizontal Vertical 3. Gedlot A Industrial Recovery Injection 13. Other (specify): Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: Water well disinfected? Yes No No STYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in to ft. Diameter ft. Dia	ı —	0. L	Amifer R	echarge: well ID						
2. Irrigation 9. Environmental Remediation: well ID a) Closed Loop Horizontal Vertical 1. Industrial Recovery Injection 13. Other (specify): Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: Water well disinfected? Yes No No STYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in to ft. Diameter in to ft. Diameter in to ft. Casing height above land surface ft. Diameter in to ft. Diameter in to ft. Casing height above land surface ft. Diameter in to ft. Diameter in to ft. Diameter in to ft. Diameter ft. Diameter ft. Diameter ft. Diameter ft. Diameter ft. Diameter in to ft. Diameter ft.	· —	8. 🗆	Monitorin	ng: well IDMV	V15					
A Industrial	1 —					a) Clos	sed Loop Horizon	tal 🗌 Verti	cal	
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: Water well disinfected? Yes No Stope	3. Feedlot				Extraction					
Water well disinfected? Yes	4. Industrial		Recovery	☐ Injection		13. 🔲 Oth	er (specify):	• • • • • • • • • • • • • • • • • • • •		
Ray Type of Casing UseD: steel PVC Other Casing diameter Into Int	Was a chemical/bacter	riological san	ıple subn	nitted to KDHE?	Yes No	If yes, date	sample was submitte	:d:		
Casing diameter										
Casing height above land surface in Weight Ibs/fit Wall thickness or gauge No.	8 TYPE OF CASING	USED: ☐ St	teel 📕 PV	C Other	CASIN	NG JOINTS:	☐ Glued ☐ Clamped	d ☐ Welded	d Threaded	
TYPÉ OF SCREEN OR PERFORATION MATERIAL: Steel	Casing diameter	in. to	ft.,	, Diameter	in. to	ft., Diame	ter in. to	ft.		
Steel Stainless Steel Fiberglass PVC Other (Specify)					lbs./ft.	Wall thickn	ess or gauge No			
Brass Galvanized Steel Concrete tile None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot Mill Slot Gauze Wrapped Saw Cut None (Open Hole) SCREEN-PERFORATED INTERVALS: From	1					□ Otho	r (Cracify)			
SCREEN OR PERFORATION OPENINGS ARE:	. –		_	_	sed (onen hole		(Specify)	• • • • • • • • • • • • • • • • • • • •		
Continuous Slot										
Louvered Shutter	1				orch Cut 🔲 D	rilled Holes	Other (Specify)			
GRAVEL PACK INTERVALS: From 13 ft. to 25 ft. From ft. to ft. Trom ft. to ft. 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete Surface Completion U -1 Grout Intervals: From	☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)									
GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete Surface Completion 0 -1	SCREEN-PERFORATED INTERVALS: From .15									
Grout Intervals: From	GRAVEL PAG	CK INTERVA	ALS: From	n 13 ft. to 25	ft., From .	ft. to	ft., From	ft. to	ft.	
Nearest source of possible contamination:	9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ■ Other Concrete Surface Completion 0 -1									
Septic Tank										
Sewer Lines				n Die Deiere		Livrosto als Dom	. Imagati	aida Staraga		
Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well Other (Specify) Distance from well? ft.	Sever Lines	_	-	_ ,	_		_	_	1	
Direction from well? Distance from well? Distance from well? To LITHOLOGIC LOG FROM TO LITHOLOG (cont.) or PLUGGING INTERVALS Sequence of Service of S										
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) 9/12/17										
0 .5 GRAVEL .5 9 SILTY CLAY 9 25 SAND Notes: 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) 9/1.2/17 and this record is true to the best of y k owledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed mo-day-year 10/17 under the business name of ASSOCIATED ENVIRONMENTAL INC Signature Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau Mater, 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.	Direction from well?			Distance from w	ell?					
SILTY CLAY 9 25 SAND Notes: Notes: 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo-day-year) 9/12/17			ITHOLO	GIC LOG	FROM	TO I	ITHO. LOG (cont.) or	PLUGGING	G INTERVALS	
Notes: Notes: No										
Notes: Notes: No										
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) 9/12/17	9 25	SAND	_							
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under my jurisdiction and was completed on (mo-day-year) 9/12/17	140tcs.									
under my jurisdiction and was completed on (mo-day-year) 9/12/17										
under my jurisdiction and was completed on (mo-day-year) 9/12/17	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed or ningred								or nlugged	
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							noi your records. Telepr			

