WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. _____ Well ID NMW-11SR

■ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County: Sedgwick | Fraction: NE ¼ NW ¼ SE ¼ SE ¼ | Section Number: 9 | Township Number: T 27 S | Range Number: R 1 ☒ E ☐ W

2 WELL OWNER: Last Name: First:
Business: City of Wichita/Environmental Health
Address: 455 N. Main
Address:
City: Wichita State: KS ZIP: 67202

Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☐
Southside right-of-way of E. 15th St N west of N. New York St.
Wichita, KS

3 LOCATE WELL WITH "X" IN SECTION BOX: N / W / E / S; NW, NE, SW, SE (X in SE); |---------1 mile---------|

4 DEPTH OF COMPLETED WELL: 22 ft.
Depth(s) Groundwater Encountered: 1) 15 ft. 2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 15.25 ft.
☒ below land surface, measured on (mo-day-yr) 3/25/20
☐ above land surface, measured on (mo-day-yr) .....
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm
Well water was ..... ft. after ..... hours pumping ..... gpm
Estimated Yield: ..... gpm
Bore Hole Diameter: 3.25 in. to 22 ft. and ..... in. to ..... ft.

5 Latitude: 37.71172 (decimal degrees)
Longitude: 97.32023 (decimal degrees)
Horizontal Datum: ■ WGS 84 ☐ NAD 83 ☐ NAD 27
Source for Latitude/Longitude:
■ GPS (unit make/model: garmen c60) (WAAS enabled? ■ Yes ☐ No)
☐ Land Survey ☐ Topographic Map
☐ Online Mapper: .....

6 Elevation: ..... ft. ☐ Ground Level ☐ TOC
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map ☐ Other .....

7 WELL WATER TO BE USED AS:
1. Domestic: ☐ Household ☐ Lawn & Garden ☐ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID .....
6. ☐ Dewatering: how many wells? .....
7. ☐ Aquifer Recharge: well ID .....
8. ■ Monitoring: well ID NMW-11SR
9. Environmental Remediation: well ID ..... ☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease .....
11. Test Hole: well ID ..... ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? ..... a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ Other (specify): .....

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted: .....
Water well disinfected? ☐ Yes ■ No

8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other ..... CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ■ Threaded
Casing diameter 1.25 in. to 12 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface +0.3 in. Weight ..... lbs./ft. Wall thickness or gauge No. Sch. 40

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 12 ft. to 22 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 10 ft. to 22 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ■ Other Bentonite-Granular
Grout Intervals: From 2 ft. to 8 ft., From 8 ft. to 10 ft., From ..... ft. to ..... ft.

Nearest source of possible contamination:
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
☐ Other (Specify) .....
Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	13	Silty clay			
13	27	Sand			
27	-	Shale			

Notes: Lithologic log based on Electrical Conductivity logging data.

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) 3/26/20 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 710 This Water Well Record was completed on (mo-day-year) 4/1/20 under the business name of Below Ground Surface, 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 of Water, 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.kdheks.gov/waterwell/index.html KSA 82a-1212 **Revised 7/10/2015**