WATER WELL R	<u> </u>		sion of Water		NMW-595	
Original Record			rces App. No.		Well ID	
1 LOCATION OF W			ion Number	Township Number		
County: Sedgwick	5w 45w 4 SE 4	NW1/4	4	T 27 S	R L DZ/E □ W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and						
Business: City of Wichita/Environmental Health direction from nearest town or intersection): If at owner's address, check here:						
Address: 455 N. Main Northside right of way on E. 25th N. approx 1, UVO ft east						
Address:						
City: Wichita	State: KS ZIP: 67202	OI N. Broa	dway Ave. C	UIGHTAL ICS		
3 LOCATE WELL	4 DEPTH OF COMPLETED WELL:	19 .	5 Latitude	37.73003	(1 : 11	
WITH "X" IN	Death (a) Considerate For constant (b) 12	:	5 Latitude		(decimal degrees)	
SECTION BOX:	Depth(s) Groundwater Encountered: 1)		Longitud	le:	(decimal degrees)	
N	2) ft. 3) ft., or 4) [\square NAD 83 \square NAD 27	
	WELL'S STATIC WATER LEVEL:			Source for Latitude/Longitude:		
	above land surface, measured on (mo-day-		GPS (unit make/model: garmen c60			
NW NE	Pump test data: Well water was	(WAAS enabled? ■ Yes □ No)				
X		☐ Land Survey ☐ Topographic Map				
W E		ter				
SW SE	after hours pumping					
	Estimated Yield:gpm	ghin	6 Elevation	ı:ft.	☐ Ground Level ☐ TOC	
S	Bore Hole Diameter:3.25 in. to19	ft and			PS Topographic Map	
mile						
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID						
1. Domestic:	5. Public Water Supply: well ID					
Household	6. Dewatering: how many wells?			e: well ID		
Lawn & Garden	7. Aquifer Recharge: well ID			☐ Uncased ☐ G		
Livestock	8. Monitoring: well ID			nal: how many bores?		
2. Irrigation	9. Environmental Remediation: well II			Loop Horizontal		
3. Feedlot	☐ Air Sparge ☐ Soil Vapor I	Extraction			charge 🔲 Inj. of Water	
4. 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						
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other						
Casing diameter 1.25 in. to 9. ft., Diameter ft., Diameter ft., Diameter ft.						
Casing height above land	surface	lhe /ft	Wall thicknes	s or gauge No. Sch. 40		
	R PERFORATION MATERIAL:	103./10.	wan thicknes	s of gauge two	***********	
l .	nless Steel Fiberglass PVC		☐ Other (Specify)		
	_ 5 1 _ 1	sed (onen hole)		Specify)	***************************************	
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:						
Continuous Slot		wah Cut III Da	illad Halas - 🗇	Othor (Charley)		
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)						
SCREEN_PERFORATI	ED INTEDVALS: Erom 9 4 to 19	tw Cut ☐ INC	nie (Open Hoie)	Α Ε	A A	
SCREEN-PERFORATED INTERVALS: From						
GRAVELPA	CK INTERVALS: From tt. to(ft., From	It. to	ft., From	ft. to ft.	
9 GROUI MATERIA	L: Neat cement Cement grout Be	entonit 🅊 🔳 Ot	her Defitoring	-Granular	• • • • • • • • • • • • • • • • • • • •	
GRAVEL PACK INTERVALS: From						
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?						
10 FROM TO	LITHOLOGIC LOG	FROM	TO LIT	HO, LOG (cont.) or I	PLUGGING INTERVALS	
0 3	Silty Clay					
3 7	Sand					
7 10	Clay					
10 43	Sand					
						
		Notos: 1:41	hologic loc baca	d on Electrical Conduc	rtivity logging data	
		- Hotes: Litt	nologic log base	d on Electrical Conduc	away 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) 3/25/20 and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No. 710						
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.						
				or your records. Telepho		
Visit us at http://www.kdheks	s.gov/waterwell/index.html	KSA 82a-121	2		Revised 7/10/2015	