

WATER WELL RECORD Form WWC-5

Original Record Correction Change in Well Use

Division of Water Resources App. No.

Well ID NMW-20DR

<p>1 LOCATION OF WATER WELL: County: Sedgwick</p>	<p>Fraction $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$</p>	<p>Section Number 17</p>	<p>Township Number T 27 S</p>	<p>Range Number R 1 <input checked="" type="checkbox"/> E <input type="checkbox"/> W</p>
<p>2 WELL OWNER: Last Name: City of Wichita/Environmental Health Address: 455 N. Main City: Wichita State: KS ZIP: 67202</p>		<p>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: <input type="checkbox"/> Northside right-of-way on W. 19th St N. approx. 100 ft. east of N. Waco Ave., Wichita, KS</p>		
<p>3 LOCATE WELL WITH "X" IN SECTION BOX: N W E S ----- 1 mile -----</p> <div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto; position: relative;"> <div style="position: absolute; top: 5px; left: 5px;">--NW--</div> <div style="position: absolute; top: 5px; right: 5px;">--NE--</div> <div style="position: absolute; bottom: 5px; left: 5px;">--SW--</div> <div style="position: absolute; bottom: 5px; right: 5px;">--SE--</div> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;">X</div> </div>	<p>4 DEPTH OF COMPLETED WELL: 40 ft. Depth(s) Groundwater Encountered: 1) 15 ft. 2) _____ ft. 3) _____ ft. or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 15.7 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 2/20/2020 <input type="checkbox"/> 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 40 ft. and _____ in. to _____ ft.</p>		<p>5 Latitude: 37.70263 (decimal degrees) Longitude: 97.34144 (decimal degrees) Horizontal Datum: <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input checked="" type="checkbox"/> GPS (unit make/model: Garmin c60) (WAAS enabled? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: _____</p>	
<p>6 Elevation: _____ ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other _____</p>				

7 WELL WATER TO BE USED AS:

<p>1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock</p>	<p>2. <input type="checkbox"/> Irrigation</p>	<p>3. <input type="checkbox"/> Feedlot</p>	<p>4. <input type="checkbox"/> Industrial</p>
<p>5. <input type="checkbox"/> Public Water Supply: well ID _____</p>	<p>6. <input type="checkbox"/> Dewatering: how many wells? _____</p>	<p>7. <input type="checkbox"/> Aquifer Recharge: well ID _____</p>	<p>8. <input checked="" type="checkbox"/> Monitoring: well ID NMW-20DR</p>
<p>9. Environmental Remediation: well ID _____</p>	<p><input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction</p>	<p><input type="checkbox"/> Recovery <input type="checkbox"/> Injection</p>	<p>10. <input type="checkbox"/> Oil Field Water Supply: lease _____</p>
<p>11. Test Hole: well ID _____</p>	<p><input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical</p>	<p>12. Geothermal: how many bores? _____</p>	<p>a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water</p>
<p>13. <input type="checkbox"/> Other (specify): _____</p>			

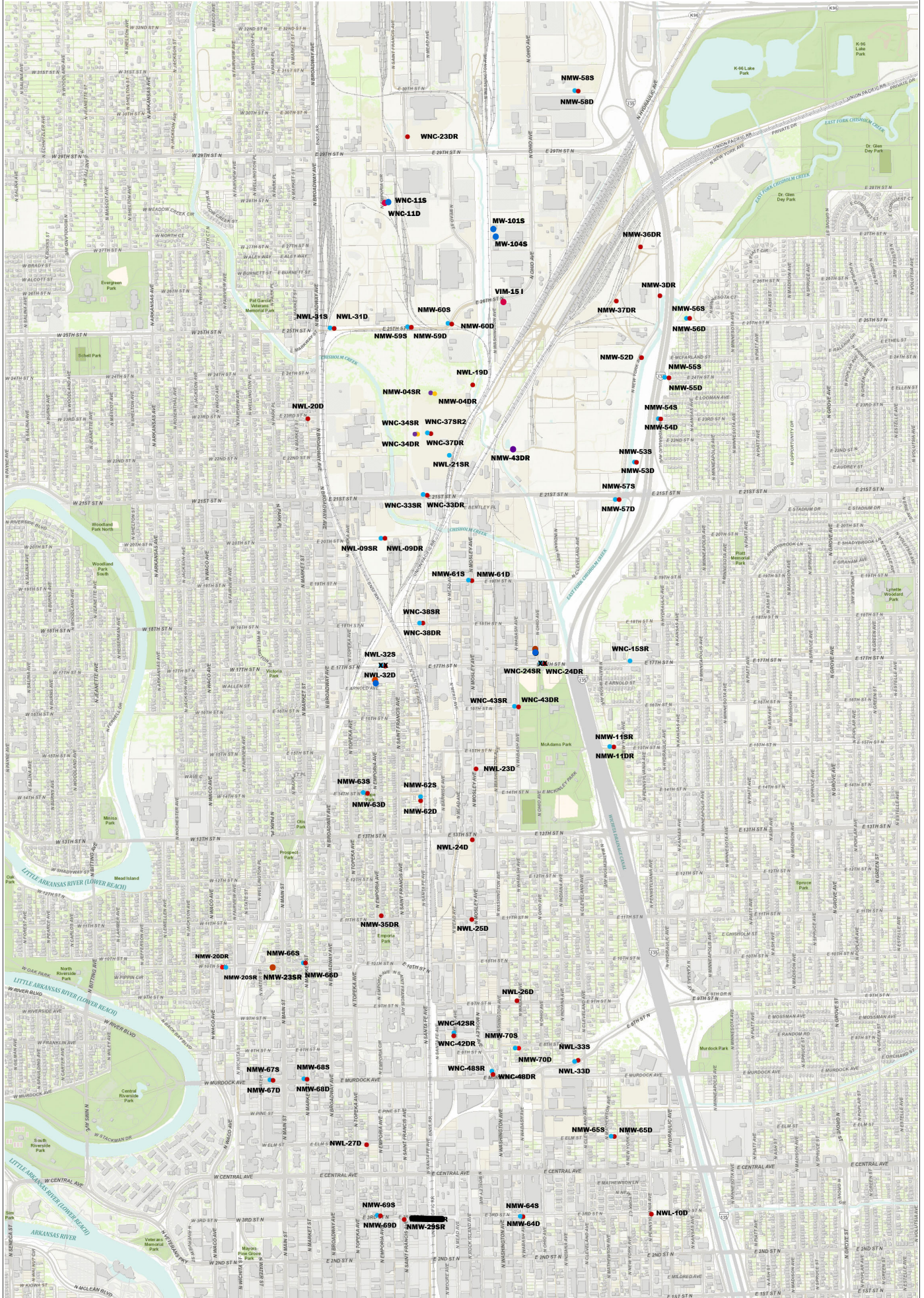
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: _____
Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other _____ CASING JOINTS: Glued Clamped Welded Threaded
Casing diameter 1.25 in. to 3.0 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 30 ft. to 40 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 26 ft. to 40 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
Grout Intervals: From 2 ft. to 26 ft., From _____ ft. to _____ 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	8	Silty clay			
8	39	Sand			
39	41	Sand w/ clay lens			
41	-	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) 2/27/2020 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) 3/10/2020 under the business name of Below Ground Surface, Inc. Signature _____



1:2000 0 600.00 1,200.00 Feet
This information is not an official record, and cannot be used as such. The user should rely only upon official records available from the custodian of records in the appropriate City and/or County department. Some data provided here was used for the preparation of these maps has been obtained from public records not created or maintained by the City of Wichita.
Map Created On: 06/19/2019 10:37 AM

- Shallow Monitoring Well with Stickup Surface Completion
- Deep Monitoring Well with Stickup Surface Completion
- Shallow Monitoring Well with Flushmount Surface Completion
- Deep Monitoring Well with Flushmount Surface Completion

1:7,200