

County: Sedgwick Fraction: NE NW SE NW Sec. 33 T. 27 S R. 1 E

CORRECTION(S) to WATER WELL COMPLETION RECORD Form WWC-5 (to rectify lacking or incorrect information)

Owner: City of Wichita Monitoring

If location corrected, was listed as:

Section-Township-Range: 32-27-1E

Fraction (1/4 calls): NW NW SE NE

Location changed to:

33-27-1E

NE NW SE NW

Other changes: Initial statements: _____

Changed to: _____

Comments: Section-Township-Range and Fractions changed by entering Lat and Long in both LEO Web and WWC5 Interactive Mapper

Verification method: Confirmed by LEO Web NAD83 and WWC5 Interactive Map

Initials: RS Date: 04-04-2023

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724
 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

WATER WELL PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

MW-520B

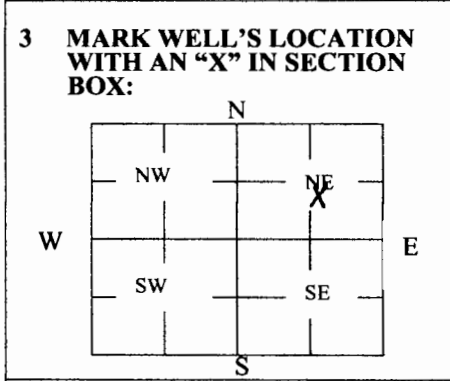
1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>	Fraction <u>NW 1/4 NW 1/4 SE 1/4 NE 1/4</u>	Section Number <u>32</u>	Township Number <u>T 27 S</u>	Range Number <u>1</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here Wichita, Ks.
Funston St. + S. Mead St.

Global Positioning Systems (GPS) information:
Latitude: 37.66066 (in decimal degrees)
Longitude: -97.32922 (in decimal degrees)
Elevation: _____
Horizontal Datum: WGS84, NAD83, NAD27
Collection Method: _____

2 WATER WELL OWNER: City of Wichita
RR#, St. Address, Box #: 455 N. Main
City, State ZIP Code: Wichita, KS 67202

GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m



4 DEPTH OF WELL 23.8 ft.
WELL'S STATIC WATER LEVEL 20.2 ft.
WELL WAS USED AS:

<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input checked="" type="checkbox"/> Monitoring
<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well
<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____

Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

<input type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specify below) _____
<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	

Blank casing diameter 4 in. Was casing pulled? Yes No If yes, how much 5 ft.
Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From 0 ft. to 23.8 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel storage	<input checked="" type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	<u>Gilbert Mosely Plume</u>
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>1</u>	<u>23.8</u>	<u>Bentonite (0-1' Top Soil)</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12/15/2022 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 604. This Water Well Record was completed on (mo/day/year) 12/18/22 under the business name of Environmental Priority Service, Inc. by (signature) [Signature]

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.