

CORRECTED

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

VIM-SVE-2

Original Record Correction Change in Well Use

Well ID

1 LOCATION OF WATER WELL: County: Sedgwick Fraction SW/4 NW/4 NE/4 Section Number 29-4 Township Number T 26 27 S Range Number R 1 E W

2 WELL OWNER: Last Name: First: Street or Rural Address where well is located: 2811 N Ohio. Waste Connections

3 LOCATE WELL WITH "X" IN SECTION BOX: N W E S 1 mile

4 DEPTH OF COMPLETED WELL: 13 ft. Depth(s) Groundwater Encountered: 1) NA

5 Latitude: 37.733889 Longitude: -97.326172

6 Elevation: 1309 ft. Source: GPS

7 WELL WATER TO BE USED AS: 1. Domestic 2. Irrigation 3. Feedlot 4. Industrial 5. Public Water Supply 6. Dewatering 7. Aquifer Recharge 8. Environmental Remediation 9. Air Sparge 10. Oil Field Water Supply 11. Test Hole 12. Geothermal 13. Other

Was a chemical/bacteriological sample submitted to KDHE? Water well disinfected?

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Nearest source of possible contamination: Septic Tank Sewer Lines Watertight Sewer Lines

Table with columns: 10 FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction...

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.