County: <u>Sedgwick</u> Fraction <u>EZ NW SE N</u>	<u>E Sec. // T 27 S R 2 (FAX</u>
CORRECTION(S) TO WATER WELL COM (to rectify lacking or incorrect Owner: <u>Fahsholtz Construction</u>	PLETION DECODD ANNUA D
Section-Township-Range: $(1 - 2 - 5 - 2 F)$	Location changed to:
Fraction (1/4 1/4 1/4):NW_SENE	EZ NUL SE NG
Other changes: Initial statements:	
Changed to: Comments:	
Verification method: Wellsite address area tool & aerial photos on KGS W	road map, and mapping
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Consto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson	initials: A date 9/20/2012

WATE	R WEI	L RECORD	Form W	WC-5	Di	ivision of Wate	r Resources App. No			
		OF WATER WELL:	Fraction			on Number	Township No.	Range Number		
County: Sedgwick 1/4 NW 1/4 SE			1/4 NE 1/4		11	T 21 S	R 2 ØE □W			
Stree	t/Rural A	ddress of Well Location;	Globa	Global Positioning System (GPS) information:						
from nearest town or intersection: If at owner's address, check here \Box .						Latitude: (in decimal degrees)				
14114 E Rockhill Ct						Longitude: (in decimal degrees)				
Wichita, KS 67230					Eleva	Elevation:				
2 WATER WELL OWNER: Fahsholtz Contruction					- Datur	Datum: WGS 84, NAD 83, NAD 27 Collection Method:				
RR#, Street Address, Box #: 11927 Shannon Way Ct						GPS unit (Make/Model:)				
City, State, ZIP Code : Wichita, KS 67206						🗍 Digital Map/Photo, 🗌 Topographic Map, 🗌 Land Survey				
1.1.00					Est. A	Accuracy: 🔲 <	3 m, 🗌 3-5 m, 🔲	5-15 m, □ >15 m		
	ATE WE H AN "X'	LL " IN / DEPTH OF (OMDI ETED WEE	T 94		A				
	ΓΙΟΝ ΒΟ									
	N	BOX:Depth(s) Groundwater Encountered(1).80ft.(2)ft.(3)ft.WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yrft.ft.ft.ft.								
		Pump test data: Well water wasft. after								
NV	W N	E EST. YIELD	gpm. Well wate	r was	ft	. after	hours pum	ping gpm		
W			eter 10in. to		ft., and	in.	to	ft.		
			TO BE USED AS:					njection well		
SV	v s	E Domestic						Other (Specify below)		
		Irrigation	🗌 Industrial 🗹	Domestic-la	wn & ga	arden 🔲 Mo	mitoring well			
	S		bacteriological sample				Yes V No			
	1 mile		day/yr sample was suł fected? 🔲 Yes 📝		• • • • • • • • • • • •					
5 TVD										
5 TYPI	E OF CA	SING USED: Steel		Other	••••••		•••••			
CASIN	G JUIN I a diamat	S: Ø Glued ☐ Clar	nped [] Welded		d	A D	•	in to a		
Casin	g ulanici o heioht	er .5" in. to	II., Diameter	· 160	. 10	Hall thic	lameter	. III. 10 II.		
TYPE	OF SCRE	EEN OR PERFORATION	MATERIAL		105./1	it., wait this	Kiless of gauge in	J		
	Steel	Stainless Steel	PVC	Г	Other (Specify)				
	Brass	Galvanized Steel	None used (open h	iole)	- 、	1 0/				
		ERFORATION OPENINC					_			
. ⊣	Continuo	us slot 🛛 Mill slot I shutter 🔲 Key punched	Gauze wrapped	Saw cut			None (open hole			
SCREE	N-PERF	ORATED INTERVALS:	From 74	ft to 94		ft From	 fi fi	n ft		
			From	ft to		ft From	ft 1	fo ft		
	GRAV	EL PACK INTERVALS:	From. 20'	ft. to94		ft., From	ft. ⁻	to ft.		
			From	ft. to		ft., From	ft. 1	o ft.		
6 GRO	UT MA	TERIAL: 🗌 Neat ceme	ent Cement grout	t 🚺 Bento	onite [] Other				
Grout Ir		From .3' ft. to		1	ft. to	ft.,	From	. ft. toft.		
What is		est source of possible contained								
	Septic ta Sewer lir			Livestock		☐ Insecticide ☐ Abandonec		er (specify below)		
Z	Watertig	ht sewer lines 🗍 Seepage r	it Feedvard	Fertilizer :		Oil well/ga				
Dire	ction from	n well north	······	. Distance						
FROM	TO	LITHOLOG		FROM	ТО			GGING INTERVALS		
0	3	earth								
3	25	clay								
25	70	yellow clay								
70	94	shale & lime					·····			
						·····, ···.				
	<u> </u>									
	<u> </u>			+						
	<u> </u>		·							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 🛛 constructed, 🗌 reconstructed, or 🗌 plugged										
under my jurisdiction and was completed on (mo/day/year) .12/15/12 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 493 This Water Well Record was completed on (mo/dav/year)										
under the business name ofReiserer Well Drilling by (signature)										
INSTRU	CTIONS:	Use typewriter or ball point pen	. PLEASE PRESS FIRML	Y and PRINT cl	learly. Ple	ase fill in blanks	And check the correc	t answers. Send three copies		
(white, blue, pink) to Kansas Depar tment of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Vi sit us at										
http://www.kdheks.gov/waterwell/index.html.										

Check: White Copy, Blue Copy, Pink Copy