| WATER WELL R   |  | Form WWC          |                        |                    | sion of Water                                 |   |                                       |  |  |
|--|--|-------------------|------------------------|--------------------|---|---|---------------------------------------|--|--|
| Original Record  |  | Change in We      |                        |                    | urces App. No.                                |   | Well ID                               |  |  |
| 1/ LOCATION OF W.  |  | : Fracti          | 5W/88E 1/4             | Sill Sec           | tion Number                                   | Township Numb                                       |                                       |  |  |
| County: Sodor  | vec_   |                   |                        |                    | L8  | <u>T 27 s</u>                                       | R DYGE W                              |  |  |
| 2 WELL OWNER. Last Name: First: 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:  |  |                   |                        |                    |   |   |                                       |  |  |
| Business: Park Place Townhomes Address: |  |                   |                        |                    |   |   |                                       |  |  |
| Address: Gity: Withita State: KS ZIP: 67207 Wichita, KS 67207  |  |                   |                        |                    |   |   |                                       |  |  |
|  | st St  | ate: NO ZIP:      | 01001                  | 9/-                | W. Chi  | TU, KS 6/   | 201                                   |  |  |
| 3 LOCATE WELL<br>WITH "X" IN   | 4 DEPTH (  | OF COMPLET        | TED WELL:              | ο <b>φ</b> ft.     | 5 Latitud                                     | e:  | (decimal degrees)                     |  |  |
| SECTION BOX:   | Depth(s) Groundwater Encountered: 1) ft.                         |                   |                        |                    |   | Longitude:(decimal degrees)                         |                                       |  |  |
| N N  | 2) ft. 3) ft., or 4) ☐ Dry Well WELL'S STATIC WATER LEVEL: 3 ft. |                   |                        |                    |   | Datum: WGS 84 NAD 83 NAD 27                         |                                       |  |  |
|  | WELL'S STA   | ATIC WATER LE     | EVEL: <b>J.(</b>       | a_11-14            | Source for                                    | Source for Latitude/Longitude:                      |                                       |  |  |
| NW NE  | below land surface, measured on (mo-day-yr)                      |                   |                        |                    | ☐ GPS   | ☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No) |                                       |  |  |
| NW NE  | Pump test data: Well water was ft.                               |                   |                        |                    |   | ☐ Land Survey ☐ Topographic Map                     |                                       |  |  |
| W E  | after hours pumping gpm  |                   |                        |                    |   | Online Mapper:                                      |                                       |  |  |
| SW SE  | Well water was ft.  after hours pumping gpm                      |                   |                        |                    |   |   |                                       |  |  |
| 1 1/4  | Estimated Vie  | nours pumpi       | ng:                    | gpm                | 6 Elevation                                   | 6 Elevation:ft. ☐ Ground Level ☐ TOC                |                                       |  |  |
| S  | Estimated Yield: 25gpm Bore Hole Diameter: in. to ft. and        |                   |                        |                    | Source:   Land Survey   GPS   Topographic Map |   |                                       |  |  |
| mile   |  | in. to            |                        |                    |   |   |                                       |  |  |
| 7 WELL WATER TO BE USED AS:  |  |                   |                        |                    |   |   |                                       |  |  |
|  |  |                   |                        |                    |   |   | ease                                  |  |  |
|  | Household 6. Dewatering: how many wells?                         |                   |                        |                    |   | 11. Test Hole: well ID                              |                                       |  |  |
| ☐ Lawn & Garden☐ Livestock   | rden 7. ☐ Aquifer Recharge: well ID                              |                   |                        |                    |   | 12. Geothermal: how many bores?                     |                                       |  |  |
| 2. Irrigation  | 9. Environmental Remediation: well ID                            |                   |                        |                    |   | a) Closed Loop   Horizontal   Vertical              |                                       |  |  |
| 3. ☐ Feedlot   | t ☐ Air Sparge ☐ Soil Vapor Extraction                           |                   |                        |                    |   | b) Open Loop   Surface Discharge   Inj. of Water    |                                       |  |  |
| 4. 🗌 Industrial  | ☐ F  | Recovery          | ☐ Injection            |                    | 13. 🗌 Othe                                    | r (specify):  | ••••••                                |  |  |
| Was a chemical/bacteriological sample submitted to KDHE?  Yes No If yes, date sample was submitted:  |  |                   |                        |                    |   |   |                                       |  |  |
| Water well disinfected? Yes \( \subseteq \nd{No} \)  |  |                   |                        |                    |   |   |                                       |  |  |
| 8 TYPE OF CASING USED: Steel DEPVC Other CASING JOINTS: DEGlued Clamped Welded Threaded  |  |                   |                        |                    |   |   |                                       |  |  |
| Casing diameter  |  |                   |                        |                    |   |   |                                       |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  Weight  |  |                   |                        |                    |   |   |                                       |  |  |
| Steel □ Stainless Steel □ Fiberglass □ Other (Specify)   |  |                   |                        |                    |   |   |                                       |  |  |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)   |  |                   |                        |                    |   |   |                                       |  |  |
| SCREEN OR PERFORATION OPENINGS ARE:  |  |                   |                        |                    |   |   |                                       |  |  |
| Continuous Slot  Gauze Wrapped  Torch Cut  Orilled Holes  Other (Specify)  |  |                   |                        |                    |   |   |                                       |  |  |
| Louvered Shutter   |  |                   |                        |                    |   |   |                                       |  |  |
| SCREEN-PERFORATED INTERVALS: From  |  |                   |                        |                    |   |   |                                       |  |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Dentonite Other   |  |                   |                        |                    |   |   |                                       |  |  |
| Grout 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  |  |                   |                        |                    |   |   |                                       |  |  |
| Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)   |  |                   |                        |                    |   |   |                                       |  |  |
| Direction from well?  Distance from well?  |  |                   |                        |                    |   |   |                                       |  |  |
| 10 FROM TO   |  | THOLOGIC LO       | OG                     | FROM               | TO L  | ITHO. LOG (cont.) o                                 | r PLUGGING INTERVALS                  |  |  |
| O I  | TOO  | Soil              |                        |                    |   |   |                                       |  |  |
| 1 4  | Chy  | -                 | 0 10                   |                    |   |   |                                       |  |  |
| 10 30  | SOFF   | meen S            | have                   |                    |   |   |                                       |  |  |
| 30 45  | Gyp  | ROCK.             |                        | -                  |   |   |                                       |  |  |
| 45 82  | Zhali  |                   |                        | 1                  |   |   |                                       |  |  |
| 82 86  | Cyp 6  | ww                |                        | Notes:             |   |   | · · · · · · · · · · · · · · · · · · · |  |  |
| 110165.  |  |                   |                        |                    |   |   |                                       |  |  |
|  |  |                   |                        | 1                  |   |   |                                       |  |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION, This water well was Constructed, $\Box$ reconstructed, or $\Box$ plugged   |  |                   |                        |                    |   |   |                                       |  |  |
| under my jurisdiction and was completed on (mo-day-year) 1/1/14 and this record/is true to the best of my knowledge and belief.  |  |                   |                        |                    |   |   |                                       |  |  |
| Kansas Water Well Contractor's License No  |  |                   |                        |                    |   |   |                                       |  |  |
|  |  |                   |                        |                    |   |   |                                       |  |  |
| INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.  |  |                   |                        |                    |   |   |                                       |  |  |
| Department of He   | e copy to WATER W  | VELL OWNER and re | etain one copy for you | ir records. Submit | fee of \$5.00 for ea                          | ch constructed well along w                         | vith one (white) copy to Kansas       |  |  |