WATER WELL		WWC-5			on of Water					
Original Record		ge in Well Use			ces App. No.		Well ID			
1 LOCATION OF	Fraction	Section Number			Township Number Range Number					
County: Sedgwick NW 1/4 SE 1/4 2 WELL OWNER: Last Name: Pherrell First: Billy										
2 WELL OWNER:	Last Name: Pherrell		eet or Rural Address where well is located (if unknown, distance and							
Business: direction from nearest town or intersection): If at owner's address, check here:										
Address: 807 S. Glenwood St. Address:										
City: Wichita	State: KS	ZIP: 67230								
3										
WITH "X" IN	THEY IN 4 DEPTH OF COMPLETED WELL: 99									
SECTION BOX: Depth(s) Groundwater Encountered: 1)					Longitude:					
WELL'S STATIC WATER LEVEL: ft.					Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:					
below land surface, measured on (mo-day-yr)										
above land surface, measured on (mo-day-yr)										
X	Dump test data: Well water was					☐ Land Survey ☐ Topographic Map				
w	after hour	after hours pumping gpm				Online Mapper:				
	Well	Well water was ft.								
SW SE		after hours pumping gpm				an· A	Croun(TOC		
	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map					
S	Bore Hole Diameter:9 in. to80 ft. and				Other					
I mile III. U										
7 WELL WATER TO BE USED AS: 1. Domestic: 5. \[Public Water Supply: well ID										
I. Domestic:	5. ☐ Public Water Supply: well ID				11. Test Hole: well ID					
Lawn & Garden		7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?					
2. Irrigation		9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical				
3. Feedlot	☐ Air Sparg	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop Surface Discharge Inj. of Water				
4. Industrial	4. Industrial Recovery Injection 13. Other (specify):									
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 diameter										
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other										
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: From60										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
Nearest source of possible contamination: Septic Tank										
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? East Distance from well? 75+										
Direction from well?	ast	Distance from w	/ell?7.5±			ft.				
10 FROM TO	LITHOLO	GIC LOG	FRO	M	TO LI	THO. LOG (cont.) or	PLUGGIN	G INTERVALS		
0 1	Top Soil			\perp						
1 28	Clay									
28 44	Blue Shale									
44 52	Brown Shale									
52 80	Aqua/Green Shale									
			 					<u>.</u>		
			Notes	s:						
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) .12/18/15 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 884 This Water Well Record was completed on (mo-day-year) 11111										
under the husiness no	me of Weninger Drilling	ia LLC	atti WEII	Sion	ature	a (IIIO-day-ye		<u> </u>		
under the business name of Weninger Drilling LLC Signature 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. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.										
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										