WATER WELL RECORD Form WWC-5 Division of Water											1	
Original Record Correction Change in Well Us						Resources App. No. Well]						
1 LOCAT	Fraction		Section Number Township Number Range Numb									
	y: Sedgwic		4 SE ¼ 34 T 27 S R 2 ■ E □ W									
	OWNER:	diam lan	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: Cherrywood Construction Inc Address: 9415 E Harry St # 305 October 1 Michigan Court M									s address,	check here.		
Address: 9413 E Harry St # 303 2211 Tara Falls Court. Wichita KS. 67207												
City:	Wichita		State: KS	ZIP: 67207		FA						
3 LOCAT		4 DEPTH	OFCOM	MPLETED WEI	LI.	86' fi	5 Latit	nde.			(decimal degrees)	
WITH "				Encountered: 1)					e:			
	N BOX:			3) ft., or					Datum: WGS 84			
	<u>, </u>			TER LEVEL:					Latitude/Longitude			
'				e, measured on (mo			,					
NW	NE		□ above land surface, measured on (mo-day-yr Pump test data: Well water was				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			(0)		
w	E		after hours pumping g				Online Mapper:					
	1 '		Well water was ft.									
	SE	after	after hours pumping g				6 Elevation:ft. Ground Level TOC					
	X	Estimated Y	Estimated Yield:gpm Bore Hole Diameter:10" in. to86'			0 1						
S Bore Hole Diam				!.Y in. to		It. and	Source		Other			
mile in. to ft.												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household 6. ☐ Dewatering: how many wells?												
				Recharge: well ID.		Cased Uncased Geotechnical						
1 —	☐ Livestock 8. ☐ Monitoring: well ID											
	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E											
4. Industr			Recovery		•							
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
Water well disinfected? Yes No II yes, date sample was submitted to RDHE? Yes No II yes, date sample was submitted.												
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other												
Casing diameter												
Casing height above land surface												
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: From .46' ft. to .86' ft., From ft. to ft., From ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible contamination: Septic Tank												
Sewer			Cess Pool	☐ Sewag	ge La		Fuel Storage		_	oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify) Direction from well? North Distance from well? 35' + ft.												
10 FROM	om well? N		LITHOLO		om we	FROM	то	TIT	ft. HO. LOG (cont.) or	DI LIGGINI	GINTEDVALS	
0'		Top Soil	LIAULU	GIC LUG		PROM	10	111	110. LOG (COIII.) OF	LUGGIN	GIVIERVALO	
3'		Clay	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·						
33'		Limestone										
39'		Gray Shale										
43'		Shaley Lime)									
						Notes:						
14 CONTRACTIONS OF LANDONAUEDIS GENERALIZATION. TIL:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) .1.1/26/17 and this record is true to the best of my knowledge and belief.												
Kansas Wa	iter Well Co	ntractor's Lic	ense No. 4	493 Thi	is Wa	ıter Well Re	cord was cor	mole	ted on (mo-day-y	ear) .1 <i>14</i> 7.11	5	
under the business name of Reiserar Well Drilling Signature Januar Raisanan Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Englandment, Bureau of Water, GWTS Section,												
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.												
		St., Suite 420, To ss.gov/waterwell/		s 66612-1367. Mail o	one to	Water Well Ow KSA 82a-12	ner and retain (212		or your records. Teleph	Revised	7/10/2015	
A 1911 A2 ST ULL	D.II WWW.KUBEK	S. KOV WATCH WELL!	HINCA.IIIIII			V&u-1						