		RECORD		WWC-5			sion of Wa				1		
		Correction		e in Well Use			irces App.			Well ID			
		WATER WEI	LL:	Fraction		Secti	ion Numl	ber	Township Numb		nge Number		
County: SEDGWICK			SE 1/4 NE 1/4 SW							E D W			
		OWNER: Last Name: LYNCH First: MICKEY					Street or Rural Address where well is located (if unknown, distance and						
Busine Addres		direction from nearest town or intersection): If at owner's address, check here:											
Addres													
City: WICHITA State: KS ZIP: 67206													
3 LOCA	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 7.1												
	"X" IN					п.	5 Lati	tude:	*****		(decimal degrees)		
SECT	ION BOX:			Encountered: 1)		J1	Long	gitud	e:		(decimal degrees)		
	N			TER LEVEL:		ш	Horn	zontal	Datum: WGS 84	⊦ ⊔ NAD	83 LI NAD 27		
	below land surface, measured on (mo-day-yr). 6/11/2019								Latitude/Longitude: unit make/model:		,		
NAV	above land surface, measured on (mo-day-yr)							n e io N	WAAS enabled?	Vec DIX	) [a\		
<b>X</b>	Pump test data: Well water was							☐ Land Survey ☐ Topographic Map					
w	E after hours pumping gpm							Online Mapper:					
SW_	Well water was ft.												
3w-	after hours pumping						6 Flevation: # Crowd Level C TOC						
		Estimated Y	gpm		6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map								
L1	S Bore Hole Diameter:1.1.5 in. to71 ft. and							Other					
1 mile  in. to ft.													
1. Domesti				er Cumply, well ID			10 🗆 0	NI Fial	d Water Commission Law				
Hous		5. ☐ Public Water Supply: well ID  d 6. ☐ Dewatering: how many wells?						10. ☐ Oil Field Water Supply: lease					
	Lawn & Garden 7. Aquifer Recharge: well ID						☐ Cased ☐ Uncased ☐ Geotechnical						
	Livestock 8. Monitoring: well ID								d: how many bores?				
2. Irriga							a) C	losed	Loop  Horizonta	d □ Verti	cal		
3. Feedl							b) O	pen L	oop   Surface Dis	charge [	Ini. of Water		
4. 🔲 Indus	trial		Recovery	☐ Injection			13. 🔲 O	ther (s	specify):		***********		
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:													
Water well disinfected? ■ Yes □ No													
Casing diameter 5 in. to 71 ft., Diameter in. to ft., Diameter in. to ft.													
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: From													
GRAVEL PACK INTERVALS: From 23 ft. to 71 ft., From ft. to ft., From ft. to ft. From ft. to ft.													
Grout Inters	rale: From	ALL. I Near Co	23	ft., From	fl to		ft From		ft to	Α	*******		
		le contaminatio		и, гин	11. 10	*******	11., 110111		16. 10	II.			
☐ Septic			ateral Lines	☐ Pit Privy		□Liv	vestock Pe	ens	☐ Insecticio	le Storage			
☐ Sewer			ess Pool	Sewage La			el Storage		☐ Abandon		/ell		
■ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
☐ Other (Specify) Direction from well? EAST Distance from well? 70 ft.													
									ft.				
10 FROM	ТО		THOLOGI	C LOG	FROM	-	ТО	LITH	O. LOG (cont.) or P	LUGGING	INTERVALS		
0		TOP SOIL			-								
2		CLAY			-								
31		LIMESTONE				_							
36		GREEN SHAL											
41	71	GRAY SHALE											
					1								
					Notes:								
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) .6/.19/2019 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) .6/21/2019													
under the business name of WENINGER DRILLING, LLC Signature Many year) 5/21/2013													
Mail 1	white copy alo	ng with a fee of \$5	.00 for each o	onstructed well to: Kan	sas Departmo	ent of F	Health and I	Enviror	ment, Bureau of Wate	r, GWTS Sec	tion.		
				512-1367. Mail one to V									
		.gov/waterwell/ind			KSA 82a-					Revised 7			