WATER	WELL R	ECORD	Form	WWC-5	Di	vision of Wat	er						
			ge in Well Use	Resources App. No				Well ID					
1 LOCATION OF WATER WELL:			Fraction	Section Number			Township Numb		ige Number				
County: Sedgwick				1/4 SE 1/4 NE 1/						■ E □ W			
2 WELL OWNER: Last Name: Tracy First: Kiel						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:							
Address	Address: 2912 N Woodridge Ct. Address: 29							912 N Woodridge Ct.					
City:	Wichita		State: KS	ZIP: 67226									
3 LOCAT				4001									
	WITH "Y" IN 4 DEPTH OF COMPLETED												
SECTIO	N BOX:		Encountered: 1)		Long	itud	e:		(decimal degrees)				
1	1		3) ft., or 4) ATER LEVEL:			Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:							
						GPS (unit make/model:)							
NW.	NE 🗶			e, measured on (mo-day				WAAS enabled?					
1 1	T.N.E.	Pump test d			☐ Land Survey ☐ Topographic Map								
					pumpinggpm			☐ Online Mapper:					
sw	Well water was												
	alter llouis pu							ı:f	ft. Ground Level TOC				
	S Estimated Yield:				08' ft and Source: ☐ Land			Land Survey	and Survey GPS Topographic Map				
1	mile in. to						Other						
7 WELL WATER TO BE USED AS:													
1. Domestic				ater Supply: well ID		10. □ O	il Fie	eld Water Supply: 1	lease				
	☐ Household 6. ☐ Dewatering: how many wells?					11. Test Hole: well ID							
Company Marrier State	■ Lawn & Garden 7. ☐ Aquifer Recharge: we							d ☐ Uncased ☐ Geotechnical					
(a)	☐ Livestock 8. ☐ Monitoring: well ID							al: how many bore					
	2. Irrigation 9. Environmental Remediation: well ID												
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E 4. ☐ Industrial ☐ Recovery ☐ Injection					Extraction		b) Open Loop Surface Discharge Inj. of Water 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													
Cosing diameter 5" in to 108' & Diameter in to 4 Diameter in to 4													
Casing diameter 5" in. to 108' ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 12" in. Weight 160 lbs/ft. Wall thickness or gauge No.													
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 .68!													
GRAVEL PACK INTERVALS: From													
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
Grout Intervals: From													
Nearest source of possible contamination: Septic Tank													
Sewer Lines													
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
☐ Other (Specify) Direction from well? West Distance from well? .56' ft.													
Direction fro		381		Distance from v						C D IMPONIAL C			
10 FROM 0'	TO		LITHOLO	GIC LOG	FROM	ТО	LH	HO. LOG (cont.) o	r PLUGGIN	GINTERVALS			
2'		Top Soil											
50'		Clay											
75'		Limestone Gray Shale											
80'													
30	100	Shaley Lime	;				-						
					Notes:	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) .5/2/17 and this record is true to the best of my knowledge and belief.													
Kansas Wa	ter Well Co	ntractor's Lic	ense No	493 This W	ater Well Re	cord was co	mple	eted on (mo-day-y	year) .6/30/.	.17			
under the b	usiness nam	e of Reiser	er.Well D	rillina	S	ignature	erry	. Keiserer					
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Edvironment, 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.													
1		t., Suite 420, To s.gov/waterwell/	-0	s 00012-130/. Mail one to	KSA 82a-1		one ro	or your records. Telep		-5524. 1 7/10/2015			
v ion us at ill	J. J. W W W. KUHEK	e.govi water well/	muca.nun		120/2 02a-1	- L - L - L - L - L - L - L - L - L - L			140 / 1300	. II EUI MUEU			