WATER WELL RECORD Form WWC-5			Division of Water			]	NANYO1	
		n Well Ust	Reso	ources App. No.		Well ID	MW21	
1 LOCATION OF WATER County Sedgwick	R WELL:	Fraction SW 1/4 SW 1/4	SW ¼ SW ½	Section Numb	per Township Nur T 27		Number 2 X E W	
2 WELL OWNER: Last Nat		First:		· <u>·</u>	ell is located (if unk			
Business: El Paso Remediatin Company			from nearest town or intersection): If at owner's address, check here:					
Address: 1001 Louisiana St. Room 757C ~130' E of 7990 E Central, Wichita, KS								
City Houston	State: TX	ZIP: 77002						
3 LOCATE WELL WITH "X" IN	4 DEPTH OF CO	MPLETED WELL:Encountered: 1)	17 ft	5 Latitude:	***************************************		cimal degrees)	
SECTION BOX:	ft Longitude 97.24425 (decimal degrees) by Well Horizontal Datum X WGS 84 NAD 83 NAD 27							
N	)ft, or 4)D TER LEVEL:7.2	ft. Source for Latitude/Longitude:						
	-yr) 5/11/20	GPS (unit make/model: )						
NW NE	-yr)	(WAAS enabled? Yes No)  X Land Survey Topographic Map						
w F	Pump test data: Well water was			Online	grapine (viap			
	l w	ater well was	ft					
SW SE	afterh	ours pumping	gpm		1352,99 ft			
x	Estimated Yield: Bore Hole Diameter.	7.25 in to	ft and	Source	Land Survey Other		Topographic Maj	
S		in to	ft	L	1 Other	***************************************		
7 WELL WATER TO BE US	ED AS:							
1 Domestic:	5 Public Water Su	pply; well ID	ı	O Oil Field	Water Supply: lease	e		
Household 6 Dewatering: how many wells?				11 Test Hole: well ID				
Lawn & Garden		Cased Uncased Geotechnical						
Livestock 8 X Monitoring: well ID MW21 12 Geothermal: How many bores?  2 Irrigation 9 Environmental Remediation: well ID a) Closed Loop Horizontal Vertical								
					) Closed Loop Horizontal Vertical  ) Open Loop Surface Discharge Inj. of Water			
4 Industrial	Recovery	Injection		Other (spe			ng. or water	
Was a chemical/bacteriological sample submitted to KDHE? Yes X No If yes, date sample was submitted:								
Water well disinfected? Yes X No								
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clampled Welded X Threaded								
Casing diameter 2 in to 7 ft, Diameter in to ft, Diameter in to ft,  Casing height above land surface -0.41 in. Weight lbs./ft. Well thickness or gauge No								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
Steel Stainless Steel Fiberglass X PVC Other (Specify)								
Brass Galvanized Steel Concrete tile None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:								
Continuous Slot X 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 7 ft. to 17 ft. From ft. to ft. From ft. to ft.							ſt,	
GRAVEL PACK INTERV		fttoft,f	rom ft	. to	ft, From	ft. to	ſt,	
y GROUT MATERIAL: Neat cement Cement grout X Bentonite X Other Concrete: 0-0.5'								
Grout intervals: From 0.5 ft. to 5 ft, From ft. to ft, From ft. to ft, Nearest source of possible contamination:								
Septic Tank	Lateral Lines	Pit Privy	Live	stock Done	[ ] to a continue	C.		
Sewer Lines Cess Pool Sewage Lagoo			Livestock Pens Insecticide Storage  X Fuel Storage Abandoned Water Well					
Watertight Sewer Lines	Seepage Pit	Feedyard		lizer Storage	Oil Well /			
Other (Specity)								
	LIMILOLO				ft			
10 FROM TO 0.8 Asphalt	LITHOLO	GIC LOG	FROM	ТО	LITHO. LOG (coi	nt.) or PLUGGIN	G INTERVALS	
0.8 2 Sand, g	ravel fill, w/ some clay						. •	
2 8 Silty cla	ny							
8 17 Sandy c	elay							
				-			- W.A.	
					dart #9166; U2-08			
Target of monitoring well is shallow groundwater, <20' of grout was installed at								
the direction of KDHE.  CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, reconstructed, or plugged under my								
jurisdiction and was completed on (mo-day-year) 4/7/20 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's								
License No. 757 This Water Well Record was completed on (mo-day-year) 6/11/20 under the business name of Larsen & Associates, Inc.								
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bucau of Water, CWTS Section,								
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 783-0-65524.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015								

