WATER WELL RECORD Form WWC-5 Division of Water													
	Record			ge in Well Use			rces App. N			Well ID	go Number		
1 LOCATION OF WATER WELL:			Fraction	Secti	Section Number 34		Township Number T 27 S	Range Number R 2 E W					
	: SEDGWIC			SW1/4 SW1/4 NW		Street or Rural Address where well is located (if unknown, dista							
2 WELL	OWNER: L	ast Name:	T.N.// N.17	First:	Street	or Kura	u Address v	wner	e well is located (i	t unknown	distance and		
		ARED INVEST	i ivi⊏iv i	I S LLU	I				ection): If at owner's	auuress,	спеск пеге:		
Address: P.O. BOX 780623 Address: Oite Address:													
City:	WICHITA	Sta	ate: KS	ZIP: 67278	WICHI	IA, KS	5 6/207						
3 LOCATI					. 55								
WITH "X" IN Depth(s) Groundwater Encountered: 1)										(decimal degrees)			
SECTIO	N BOX:	Depth(s) Groun	nawater	Encountered: 1)	f(x) = f(x) ft., or $f(x) = f(x)$ Dry Well				Horizontal Datum: WGS 84 NAD 83 NAD 27				
N N	1	WEI I'S STA	TER LEVEL:	18 1)			Latitude/Longitude:	L NAD	65 LI NAD 21			
		below land	d surface	e, measured on (mo-da	GPS (unit make/model: I-PHONE)								
NW	NE	above land	e, measured on (mo-da	(WAAS enabled? Yes No)									
1, 1,	I		vater was	☐ Land Survey ☐ Topographic Map									
w	-E	after	s pumping	☐ Online Mapper:									
SW	X OF		water was										
5W	SE			pumping gpm 6 Elevation					□ Ground	d Level □ TOC			
Estimated Yield:			gpm 12 in. to55 ft. and			6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ■ GPS ☐ Topographic Map							
S Bore Hole Diameter:				III. to					Other				
1 mile in. to ft. Uother													
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease													
1	Household 6. ☐ Dewatering: how many wells?												
Lawn &			Recharge: well ID					☐ Uncased ☐ G					
Livesto		ng: well ID			12. Geoth	nerma	al: how many bores?						
	. 🗌 Irrigation 9. Environmental Remediation: well ID												
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extr												
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 5 in to 55 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 12 in Weight 2.35 lbs./ft. Wall thickness or gauge No. SDR26													
Casing height above land surface! in. Weight													
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 .35 ft. to .55 ft., From													
G	RAVEL PA	CK INTERVAI	LS: Fro	m 24 ft. to!	55 ft.,	From	ft. to	o	ft., From	ft. t	o ft.		
GRAVEL PACK INTERVALS: From													
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other													
Nearest sou	rce of possib	le contamination	1:										
☐ Septic			teral Lin				Livestock Pe		☐ Insectic				
Sewer			ess Pool				Fuel Storage Fertilizer Sto	ะ การกล					
Other (Specify) Direction from well? EAST Distance from well? 20'+ ft.													
10 FROM	TO	Lľ	THOLO	GIC LOG		.OM	TO	LIT	HO. LOG (cont.) or	PLUGGII	NG INTERVALS		
0		TOP SOIL											
3		CLAY											
14		GRAY SHALE											
		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) 2:1-2024 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236													
Kansas Water Well Contractor's License No. 250													
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,													
100	0 SW Jackson	St., Suite 420. Topel	ka, Kansa	as 66612-1367. Mail on	e to Water V	Vell Own	ner and retain	one fo	or your records. Teleph	one 785-29	6-5524.		
		s.gov/waterwell/inc				82a-12				Revise	ed 7/10/2015		