

CORRECTION(S) TO WATER WELL RECORD (WWC-5)

(to rectify lacking or incorrect information)

County: Sedgwick

Location listed as:

Section-Township-Range: 7-285-1EFraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NE NE NE

Location changed to:

7-285-1ENW NE NEOther changes: Initial statements: Shawnee CountyChanged to: Sedgwick County

Comments:

verification method: Wellsite address, city street map, and
mapping tool on KGS website.initials: DR date: 1/18/2011submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Shawnee		NE ¼ NE ¼ NE ¼		7		T 28 S		R 1 E	
Distance and direction from nearest town or city street address of well if located within city? 1503 W. 31 st St, Wichita, KS									
2 WATER WELL OWNER: Kansas Enterprises									
RR#, St. Address, Box # : P.O. Box 17336					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : Wichita, KS					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 20 ft. ELEVATION: 1284.08							
		Depth(s) Groundwater Encountered 11.5 ft. 2 ft. 3 ft. Ft.							
		WELL'S STATIC WATER LEVEL 12.51 ft. below land surface measured on mo/day/yr 02/22/11							
		Pump test data: Well water was _____ Ft. after _____ hours pumping _____ Gpm							
		Est. Yield _____ Gpm: Well water was _____ Ft. after _____ Hours pumping _____ Gpm							
		Bore Hole Diameter 8.625 in. to 20 ft. and _____ in. to _____ Ft.							
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
		1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
		2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well OBS-1							
Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was Submitted									
Water Well Disinfected? Yes No X									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____									
7 Fiberglass _____ Threaded X									
Blank casing diameter 2 in. to 4.5 Ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface FLUSH In., weight SCH 40 Lbs./ft. Wall thickness or gauge No. _____									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) _____									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) _____									
2 Louvered shutter 4 Key punched 7 Wire wrapped 9 Drilled holes _____									
3 Torch cut 10 Other (specify) _____									
SCREEN-PERFORATED INTERVALS: From 4.5 ft. to 24.5 ft. From _____ ft. to _____ ft.									
SAND PACK INTERVALS: From 3.5 ft. to 24.5 ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL:									
1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____									
Grout Intervals From 2 0.5 ft. to 18 From 3 18 to 20 ft. From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:									
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) Contaminated Site									
13 Insecticide storage									
Direction from well? How many feet?									
FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 2 Fill									
2 12.5 Silty Clay									
12.5 20 Sand									
20 TD End of Borehole									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w									
Completed on (mo/day/yr) 02/21/11 And this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 02/24/11									
under the business name of Associated Environmental, Inc. By (signature) Bradley J. Johnson									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									