

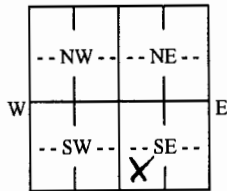
**WATER WELL RECORD Form WWC-5**Division of Water Resources App. No.  Well ID   Original Record  Correction  Change in Well Use**1 LOCATION OF WATER WELL:**

County: Sedgwick

Fraction  $\frac{1}{4}$   $\frac{1}{4}$  SW  $\frac{1}{4}$  SE  $\frac{1}{4}$ 

Section Number 1

Township Number T 28 S

Range Number R 1  E  W**2 WELL OWNER:** Last Name: First:Business: 22 CEI/CEIER  
Address: 15657830 Pittsburg St., Suite 120  
Address:  
City: McConnell AFB State: KS ZIP: 67221-3617Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:   
Well located within McConnell AFB, Wichita, KS**3 LOCATE WELL WITH "X" IN SECTION BOX:**  
N

-----1 mile-----

**4 DEPTH OF COMPLETED WELL:** ... 21.0 ... ft.  
Depth(s) Groundwater Encountered: 1) ..... ft.  
2) ..... ft. 3) ..... ft., or 4)  Dry Well  
WELL'S STATIC WATER LEVEL: ..... ft.  
 below land surface, measured on (mo-day-yr) .....  
 above land surface, measured on (mo-day-yr) .....  
Pump test data: Well water was ..... ft.  
after ..... hours pumping ..... gpm  
Well water was ..... ft.  
after ..... hours pumping ..... gpm  
Estimated Yield: ..... gpm  
Bore Hole Diameter: 8.25 in. to 21.0 ft. and  
..... in. to ..... ft.**5 Latitude:** ..... 37.63585 ..... (decimal degrees)  
**Longitude:** ..... 97.25098 ..... (decimal degrees)  
Horizontal Datum:  WGS 84  NAD 83  NAD 27  
Source for Latitude/Longitude:  
 GPS (unit make/model: Garmin 60c .....)  
(WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....**6 Elevation:** ..... ft.  Ground Level  TOC  
Source:  Land Survey  GPS  Topographic Map  
 Other .....**7 WELL WATER TO BE USED AS:**

- |   |   |   |
|---|---|---|
| 1. Domestic:<br><input type="checkbox"/> Household<br><input type="checkbox"/> Lawn & Garden<br><input type="checkbox"/> Livestock<br>2. <input type="checkbox"/> Irrigation<br>3. <input type="checkbox"/> Feedlot<br>4. <input type="checkbox"/> Industrial | 5. <input type="checkbox"/> Public Water Supply: well ID .....<br>6. <input type="checkbox"/> Dewatering: how many wells? .....<br>7. <input type="checkbox"/> Aquifer Recharge: well ID .....<br>8. <input checked="" type="checkbox"/> Monitoring: well ID OW26-MW06<br>9. Environmental Remediation: well ID .....<br><input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction<br><input type="checkbox"/> Recovery <input type="checkbox"/> Injection | 10. <input type="checkbox"/> Oil Field Water Supply: lease .....<br>11. Test Hole: well ID .....<br><input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical<br>12. Geothermal: how many bores? .....<br>a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical<br>b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water<br>13. <input type="checkbox"/> 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 JOINTS:  Glued  Clamped  Welded  Threaded  
Casing diameter ..... 2.0 ..... in. to ..... 9.8 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface ..... 0.5 ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. Sch. 40

## 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 19.8 ft. to 9.8 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From 21.0 ft. to 7.9 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....  
Grout Intervals: From 7.9 ft. to 4.9 ft., From 4.9 ft. to 1.2 ft., From ..... ft. to ..... ft.

## Nearest source of possible contamination:

- |   |  |  |  |   |
|---|--|--|--|---|
| <input type="checkbox"/> Septic Tank            | <input type="checkbox"/> Lateral Lines | <input type="checkbox"/> Pit Privy     | <input type="checkbox"/> Livestock Pens          | <input type="checkbox"/> Insecticide Storage  |
| <input type="checkbox"/> Sewer Lines            | <input type="checkbox"/> Cess Pool     | <input type="checkbox"/> Sewage Lagoon | <input checked="" type="checkbox"/> Fuel Storage | <input type="checkbox"/> Abandoned Water Well |
| <input type="checkbox"/> Watertight Sewer Lines | <input type="checkbox"/> Seepage Pit   | <input type="checkbox"/> Feedyard      | <input type="checkbox"/> Fertilizer Storage      | <input type="checkbox"/> Oil Well/Gas Well    |
| <input type="checkbox"/> Other (Specify) .....  |  |  |  |   |

Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	21.0	Clay			
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) 5/24/2016 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 7.10 ..... This Water Well Record was completed on (mo-day-year) 6/15/2016 ..... under the business name of Below Ground Surface, Inc. ....

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, 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.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 1/20/2015