County: <u>Sedawick</u> Fraction NE NW SW.	<u>SE</u> Sec. / T <u>28</u> S R <u>/E</u> AW
CORRECTION(S) TO WATER WELL CO	DMPLETION RECORD (WWC-5)
Owner: McConnell AFB	
Location was listed as:	Location changed to:
Section-Township-Range: None Given	1-285-/E
Fraction (¼ ¼ ¼):	1-285-/E NE NW SW SE
Other changes: Initial statements:	
Changed to:	
Comments: Zebra Technical Service	ces LLC is a division of
Cascade Drilling, KS	Lic. No. 890
Cascade Drilling, KS Verification method: Latitude # longitude	KGS "LEO" conversion tool,
and mapping tool on KGS w	rebsite.
	initials: ARL date: 12/20/20/6
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW	Constant Ave., Lawrence, KS 6604 F3 / 26

WATER WELL			WWC-5		ion of Water		1W221		
Original Record			e in Well Use		rces App. No).	Well ID		
1 LOCATION OF		LL:	Fraction	Section Number Township Number Range Number					
County: Se	dquick		1/4 1/4 1/4	1/4	1 4 1 1	TS			
2 WELL OWNER Business:	NER: Last Name: First: 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:	M ()	1 12	· 73	irection from no					
Address: McConnell AFB McConnell AFB						5			
City:		State:	ZIP:		,				
3 LOCATE WELL	4 DEPTE	I OF COM	(PI ETED WELL.	33.5 A	5 Latitu	10.37.63957	34 (decimal degrees)		
WITH "X" IN	Depth(s) G	4 DEPTH OF COMPLETED WELL: 33:5ft. 5 Latitude: 3763857.34 Depth(s) Groundwater Encountered: 1)3ft. Longitude: -997369.39					(decimal degrees)		
SECTION BOX:		2)			Longitude: -097.3.59.3.0 (decimal degrees) Horizontal Datum: UWGS 84 ID NAD 83 UNAD 27				
N		WELL'S STATIC WATER LEVEL:			Source for Latitude/Longitude:				
		below land surface, measured on (mo-day-yr). 3.2.16.			GPS (unit make/model:)				
NW NE	1 —		, measured on (mo-day-y			(WAAS enabled? Yes No)			
	1 -		vater was ft.			☐ Land Survey ☐ Topographic Map			
W	E after		s pumping		☐ On	line Mapper:			
SWSE	after		s pumping		7				
		Yield:		-P***	6 Elevat	ion: 23 17 . 60 .	fl. Ground Level 🗗 TOC		
S			in. to	. ft. and	Source		GPS Topographic Map		
1 mile			in. to	., ft,		☐ Other	*************		
7 WELL WATER									
1. Domestic:			ater Supply: well ID		10. 🔲 Oil	Field Water Supply:	lease		
Household			ng: how many wells?			11. Test Hole: well ID			
☐ Lawn & Garden ☐ Livestock			echarge: well ID		_	ermal: how many bor	-		
2. Irrigation	9. F	nvironment	g: well IDal Remediation; well ID	IW 221		sed Loop Horizo			
3. Feedlot		Air Sparg					Discharge Inj. of Water		
4. Industrial		Recovery			13. 🗖 Off	ner (specify):			
Was a chemical/ba	cteriological sa	mple subn	nitted to KDHE?	Yes No No	If ves. date	sample was submit	ted:		
Water well disinfec					·- ,,	F			
			C Other	CASIN	G JOINTS:	☐ Glued ☐ Clamp	ed Welded Threaded		
Casing diameter	2 in. to1	8:5 ft.	, Diameter	in. to	ft., Diam	eter in. to			
			n. Weight						
TYPE OF SCREEN									
	Stainless Steel	_				ет (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									
GRAVEL PACK INTERVALS: From/4.5. ft. to38. ft., From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From 2.5									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
☐ Watertight Sewer Lines ☐ Scepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)									
Direction from well? Distance from well?									
10 FROM TO		LITHOLO		FROM			or PLUGGING INTERVALS		
0 2	FILL			T					
2 38	gleubi	DINY S	Silty Clay						
	7 1								
				Notes:					
11.00	710.0								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged									
under my jurisdiction and was completed on (mo-day-year)3.7.1.6 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)									
under the business name of									
Mail I 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 Jack	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.k	dheks gov/waterwel	Vindex.html		KSA 82a-12	12		Revised 7/10/2015		