		RECORD	Form WW		Division of Water					
Original Record Correctio						ources App. No		Well ID		
	1 LOCATION OF WATER WELL: Fraction					Section Number Township Number Range Number				
County: Sedgwick SE½ NW ½ NW ½										
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance an direction from nearest town or intersection): If at owner's address, check here:										
Address: 1000 SW Jackson St. Suite 410									_	
Address:		Jackson Ot.			Approximat	approximately 150' N. of intersection of W. Savannah St. & S. St.				
City:	Topeka		State: Ks. ZII	· 66612-1367	Clair St. on	west side of	S. St. Clair			
3 LOCAT		4 DEPTE	OF COMPLE	ETED WELL:	46 n	. 5 Latitud	N37.649	61	(decimal demess)	
1	Denth(s) Groundwater Engagement: 1)									
	ON BOX: N			ft., or 4)		Horizon	ital Datum: WGS 8	A B NAD	R3 NAD 27	
WELL'S STATIC WATER LEVEL:					Source for Latitude/Longitude					
X		☐ below	below land surface, measured on (mo-day-ye			□GP	S (unit make/model:)	
NW	NE		above land surface, measured on (mo-day-yr				(WAAS enabled?		0)	
				est data: Well water was			☐ Land Survey ☐ Topographic Map			
W	Well water was							• • • • • • • • • • • • • • • • • • • •		
sw	SE	after	hours pumping gpm				4000 44			
				V:-14.			6 Elevation: 1288.14			
	S	Bore Hole I	ore Hole Diameter: 8.75 in. to 16.28			and Source: Land Survey GPS Topographic Ma				
1 mile in. to										
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID										
1. Domestic										
			6. ☐ Dewatering: how many wells?							
	Livestock 8			7. ☐ Aquifer Recharge: well ID 8. ■ Monitoring: well ID			rmal: how many bores			
2. Irrigation 9. Environmental Ren										
3. Feedlot] Air Sparge	xtraction	b) Ope	b) Open Loop Surface Discharge Inj. of Water				
4. Indust	rial		Recovery	☐ Injection		13. 🔲 Oth	er (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										
Casing height above land surface										
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel										
☐ 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 .35.76 ft. to .45.76 ft., From										
GRAVEL PACK INTERVALS: From32 ft. to46 ft., From ft. to ft., From ft. to ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
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 ☐ Secpage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
Direction from well?										
								****	O DITTERVALE	
10 FROM	11		LITHOLOGIC L		FROM	TO L	ITHO. LOG (cont.) or	rLUGGIN(JINIERVALS	
0			brown, moist, sand stringers	piasiic,						
12			brown, fine, v	et trace clay	 					
20			ellow brown, le		 					
30			ellow brown, le					···········		
45.9		Shale, black		3000, WOL						
			,		Notes:	J				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo-day-year) 8-31-2916 and this record is true to the best of my knowledge and belief.										
under my i	urisdiction a	nd was compl	leted on (mo-da	v-vear) 8-31-20	16 and 1	this record is	true to the hest of my	v knowleda	e and helief	
Kansas Wa	iter Well Co	ntractor's Lice	ense No. 994	This Wat	er Well Rec	ord was comp	oleted on (mo-day-ye	ar) . i 1 †	416	
under the b	usiness nam	ie ot milykyki	いいもいねいたいないり	Service Inc	S19	matureX.	1. A. P. T.	. 		
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 7/10/2015										

S. Meridian Ave & W. Pawnee Ave. Piezometric Surface Map (Deep) West Pawnee Site ISL C2-087-73372 Wichita, Kansas Figure 4-5 BURNS MEDONNELL 200 250 neeCI\Studies\Geospatia\ArcDocs\Figure4_5_Piezo_Deep_Wells_Map_103.mxd EERING COMPANY, INC. Groundwater Flow Direction 1281 Piezometric Contour West Pawnee Monitoring Well Path: \\bmcd\dfs\Ciients\EnV\KDHE\93671_WestPav Air Capitol Monitoring Well Ice Masters Monitoring Well NIKIMWOJ D ... LUST Monitoring Well Legend