WATER WELL RECORD Form WWC-5 Division of Water									
Original Record Correction Char			ge in Well Use				Well ID		
1 LOCATION OF WATER WELL: County: Sedgwick			Fraction	Section Number Township Number Range N			per Range Number		
			SW 4NW 4SW						
2 WELL Business	OWNER:	Last Name: YER CONSTRUCTION	First:		Street or Rural Address where well is located (if unknown, distance and				
Address:	10008 W	. York	пис	direction from nearest town or intersection): If at owner's address, check here:					
Address:				3306 7	01 - 66 · · · ·				
City:	<u>Wichita</u>	State: Kans	sas ZIP: 67215	P: 67215 3206 E. Shoffner St. Wichita, Kansas 67216			Kansas 67216		
3 LOCATE WELL WITH "X" IN  4 DEPTH OF COMPLETED WELL: 40 ft. 5 Latitude: 37.59341 (decimal									
	ON BOX:	Depth(s) Groundwater	Encountered: 1)	ft.	ft. Longitude: -97.29824 (decimal degrees)				
	N 2) ft. 3) ft., WELL'S STATIC WATER LEVEL: 1.2				Horizon	ital Datum: 🗷 WGS 84	4 □ NAD 83 □ NAD 27		
		WELL SSIATIC WA	TER LEVEL: ## , measured on (mo-day-y	ft. 10/06/22		or Latitude/Longitude:	•_		
NW -	NE	above land surface.	measured on (mo-day-y	r)	<b>(≭</b> ) GP:		Phone)		
		Pump test data: Well v	ımp test data: Well water was ft.			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			
w	E	after hour	s pumping	gpm	On	Online Mapper:			
sw	SE	Well	vater was fi	•					
*	1 1 1	Estimated Vield:	after hours pumping gpm Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC			
	S	Bore Hole Diameter: 1	12 in. to 40 ft. and			Source: Land Survey GPS Topographic Map			
1	mile		in. to						
7 WELL WATER TO BE USED AS:									
	1. Domestic: 5. ☐ Public Water Supply: well ID					10. ☐ Oil Field Water Supply: lease			
	Household 6. Dewatering: how many wells?				11. Test Ho	11. Test Hole: well ID			
1	■ Lawn & Garden 7. ☐ Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
	□ Livestock       8. □ Monitoring: well ID         2. □ Irrigation       9. Environmental Remediation: well ID				12. Geothermal: how many bores?				
3. Feedlot Air Sparge Soil Vapor Fa				Extraction	a) Clos h) Ope	b) Open Loop  Surface Discharge  Inj. of Water			
4. $\square$ Industrial $\square$ Recovery $\square$ Injection					13. 🔲 Othe	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									
Consideration of the constant									
Casing neight above land surface									
□ 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)									
Louveted Statter Likey Punched   Wire Wrapped   Saw Cut   None (Open Hole)									
SCREEN-PERFORATED INTERVALS:       From 5       ft. to 40       ft., From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
1 Ground Intervals, 110 III 12 11. 10 12. 10 III 11. 10 1									
rear est source of possible contamination:									
☐ Septic☐ Sewer		☐ Lateral Line			Livestock Pens		eide Storage		
		☐ Cess Pool	☐ Sewage La		Fuel Storage		oned Water Well		
■ Watertight Sewer Lines									
Direction from well? East									
TO FROM	TO	LITHOLOG	GIC LOG	FROM	TO L	ITHO, LOG (cont.) or	PLUGGING INTERVALS		
0		topsoil							
3 10		clay							
18		fine sand							
38		medium sand gray shale							
	20	gray snate							
				Nada					
				Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo day year) 10/06/2022									
under my jurisdiction and was completed on (mo-day-year) 19/06/2022 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No 236 This Water Well Record was completed on (mo-day-year) 10/8/2022  Harp Well and Pump Service									
Ixalisas wal	iei weli Con	tractor's License No	200 This Water	Well Decord	vac completed	om (mag dans asses) 10	/0/2022		
Mail I w	hite copy along	e of	onstructed wall to V	æSi	gnature	S.Harp			
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 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									
							43V13VM // IV/4UI3		