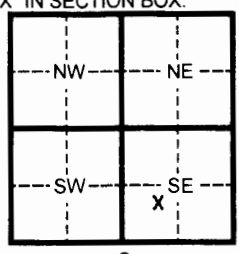


WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number		Range Number	
County: Sedgwick		NE ¼ SW ¼ SE ¼	6		T 28 S		R 2 E	
Distance and direction from nearest town or city street address of well if located within city? Building 692, McConnell Air Force Base - Wichita								
2 WATER WELL OWNER: 22nd CES CEVQ US Air Force								
RR#, St. Address, Box # : 53000 Hutchinson St., Ste. 109 MAFB Board of Agriculture, Division of Water Resources								
City, State, ZIP Code : Wichita, KS 67221 Application Number:								
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL 17.5 ft. ELEVATION: 1371.56 (TOC)					
			Depth(s) Groundwater Encountered 1 15.2 ft. 2 _____ ft. 3 _____ ft.					
			WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr					
			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 in. to 17.5 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					
			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 _____ Flush _____								
Blank casing diameter 2 in. to 7.5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.								
Casing height above land surface Flush in., weight 0.703 lbs./ft. Wall thickness or gauge No. SCH. 40								
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 6 Wire wrapped 9 Drilled holes _____								
7 Torch cut 10 Other (specify) _____								
SCREEN-PERFORATED INTERVALS: From 7.5 ft. to 17.5 ft. From _____ ft. to _____ ft.								
GRAVEL PACK INTERVALS: From 5.5 ft. to 17.5 ft. From _____ ft. to _____ ft.								
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____								
Grout Intervals From 1.5 ft. to 5.5 ft. From _____ ft. to _____ 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) _____								
13 Insecticide storage _____								
Direction from well? _____ How many feet? _____								
FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS								
0.0 0.5 Asphalt								
0.5 17.5 CL Lean Clay, dark gray to brown to brown-gray, some gypsum and small gravel below 5.5', thin gravel lens at 11.7'								
GPS: Northing: 1668545.054060								
Easting: 1674384.954530								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 12/27/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 01/21/11 under the business name of Geotechnical Services Inc. by (signature) _____								
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.								