County: <u>Sedawick</u> Fraction NW SW NW.	<u>SE</u> Sec. 6 T 28 S R 2 DW					
CORRECTION(S) TO WATER WELL COM						
Owner: McConnell AFB	ect information)					
Location was listed as:	Location changed to:					
Section-Township-Range: None Given	6-285-2E					
Fraction (¼ ¼ ¼):	6-285-2E NW SW NW SE					
Other changes: Initial statements:	70.00					
Changed to:						
Comments:						
Verification method: <u>Latitude</u> & longitude,	KGS' "LEO" conversion tool,					
and mapping tool on KGS well	bsite.					
• • • • • • • • • • • • • • • • • • • •	initials: Alate: 9/16/2015					
Submitted by: Kansas Geological Survey, Data Resources Library, 1930	Constant Ave., Lawrence, KS 66047-3726					

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RECO	ORD	ī	Form W	WC-5	D	ivision of Wate	er Resources App. N	SS01-IW15	
1 LOCATION OF WAT		Fraction	01111 11	WC-5		ion Number	Township No.		
	EK WELL;		17	17 17		ion Number	<u> </u>	Range Number	
County: Sedgwick		1/4	1/4	1/4 1/			T S	R DE DW	
Street/Rural Address of					Glob	al Positioning	g System (GPS) ir	iformation:	
from nearest town or into	owner's add	Latit	Latitude: .37.6408754 (in decimal degrees)						
McConnell AFB						Longitude: -097.2529154 (in decimal degrees)			
						Elevation: 1368.75 TOC, 1369.08 MED			
2 WATER WELL OWN	TED.						4, 🗹 NAD 83, 🗀	NAD 27	
2 WATER WELL OWN	McConr	nell AFB				ection Method:			
RR#, Street Address, Bo								)	
City, State, ZIP Code	:							c Map, 🛮 Land Survey	
					Est. A	Accuracy: 🔽 <	<3 m, ∐ 3-5 m, ∐	5-15 m, □ >15 m	
3 LOCATE WELL	A DEPUTE OF	COMPLET	ESTA STATE	r 25		C.			
	4 DEPTH OF COMPLETED WELL 25 ft.								
SECTION BOX:	Depth(s) Groundwater Encountered (1).7								
N I	WELL'S STAT	IC WATER	LEVEL:	<b>!.</b> f	t. below	land surface:	measured on mo/d	.ay/yr	
	Pump test data: Well water wasft. after hours pumping gpm								
NW NE I	EST. YIELDgpm. Well water wasft. afterhours pumpinggpm								
W E									
	WELL WATER							Injection well	
	☐ Domestic							Other (Specify below)	
	Was a chemical/								
S				bmitted			ies 🗆 No		
·-									
i iiii	Water well disin	rected?	res 🔽	NO					
5 TYPE OF CASING US	ED: Stee	PV	C 🔲 (	Other			*****		
CASING JOINTS: 🔲 G	lued $\Box$ Clar								
Casing diameter .2	in to 10	ft D	iameter	in	to	ft D	Diameter	in. to ft.	
Casing height above land	I surface 0	in	Weight	t	lhs /	ft Wall thi	ckness or gauge N	Sch. 40	
TYPE OF SCREEN OR PI	EDEOD ATION	MATERIAL	., Wolgii		105.7	re., wan an	okiloss of gauge 14	0	
			L.	Г	Other	(Specify)			
☐ Steel       ☐ PVC       ☐ Other (Specify)         ☐ Brass       ☐ Galvanized Steel       ☐ None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)									
☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify)									
CREEN-FERFORATED INTERVALS. FIGHT. IV									
From									
GRAVEL PACK									
								to ft.	
6 GROUT MATERIAL: ☑ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other									
Grout Intervals: From .0 ft. to9 ft., From ft. to ft., From ft. to ft.									
What is the nearest source of									
☐ Septic tank	Lateral lin			☐ Livestock	pens	☐ Insecticide	e storage 🔲 Oth	ner (specify below)	
☐ Sewer lines	☐ Cesspool			☐ Fuel stora		☐ Abandone	d water well		
☐ Watertight sewer line				☐ Fertilizer		Oil well/g			
Direction from well		·····		Distance	from w	vell			
FROM TO	LITHOLOG	IC LOG		FROM	TO	LITHO. L	OG (cont.) or PLU	JGGING INTERVALS	
0 25 Gray Cla									
	<u>;-1</u>								
<del>       </del>				1		1			
				<del></del>					
				1					
				† ·					
7 CONTRACTOR'S OR	LANDOWNET	2'S CEDTI	FICATIO	N. This we	er wall	was Manat	nicted D reconst	nicted or Diploged	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed, reconstructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) .10/25/2014 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 890 This Water Well Record was completed on mo/day/year) /2/16/2014									
under the business name of									
INSTRUCTIONS: Use typewri									
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.  Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									