County: Sedawick Fraction NE SE NW SU) Sec. 7 T 28 S R 2 EW
CORRECTION(S) TO WATER WELL COMP (to rectify lacking or incorrect Owner: McConnell AFB	
Location was listed as:	Location changed to:
Section-Township-Range: None Given	7-285-2E
Fraction (1/4 1/4 1/4):	7- 285-2E NE SE NW SW
Other changes: Initial statements:	
Changed to:	
Comments:	
Verification method: Latitude \$ longitude, and mapping tool on KGS we	KG5" LEO" conversion tool,
	initials: Adate: 10/2/2015
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Colto: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jacks	nstant Ave., Lawrence, KS 66047-3726 / /

WATER WELL REC		Form W	WC-5	Division of Water Resources App. No.
1 LOCATION OF WA	TER WELL:	Fraction	17 17	Section Number Township No. Range Number
County: Sedgwick	CIVIII	1/4 1/4	1/4 1/4	
Street/Rural Address o				Global Positioning System (GPS) information: Latitude:37.6254997
from nearest town or in	ntersection: If at o	owner's address, chec	k nere	Longitude: -097.2581514 (in decimal degrees)
McConnell AFB				Elevation: 1352.15 TOC, 1352.51 MED
				Datum: WGS 84, NAD 83, NAD 27
2 WATER WELL OW	NER: McCon	nell ΔER		Collection Method:
RR#, Street Address,	Box #:	ICII AI D		GPS unit (Make/Model:)
City, State, ZIP Code				Digital Map/Photo, Topographic Map, Land Survey
				Est. Accuracy:
3 LOCATE WELL		· · · · · · · · · · · · · · · · · · ·		
WITH AN "X" IN	4 DEPTH OF	COMPLETED WEL	L 32	ft.
SECTION BOX:	Depth(s) Groundwater Encountered (1).12			
N	Depth(s) Groundwater Encountered (1).12			
	Pump	test data: Well wat	er was	ft. after hours pumping gpm
NW NE	DOT VIDID W. II A			
w - NW NE - E				ft., and ft.
l "				ter supply Geothermal Injection well
	☐ Domestic			ter supply Dewatering Other (Specify below)
SW SE				wn & garden Monitoring well
				o Department? Yes V No
S	If yes, mo/	day/yr sample was su	bmitted	
1 mile		fected? Yes		
5 TYPE OF CASING U				
CASING JOINTS:	Glued L Clar	nped Welded	✓ Threaded	d
Casing diameter .2	in. to!4	ft., Diameter	1 n . 1	to ft., Diameter in to ft.
			ıt	lbs./ft., Wall thickness or gauge No. SCH. 40
TYPE OF SCREEN OR			_	
	inless Steel			Other (Specify)
		None used (open	hole)	
SCREEN OR PERFORATION OPENINGS ARE:				
Continuous slot	Mill slot	Gauze wrapped	loren cut	☐ Drilled holes ☐ None (open hole)
Louvered shutter Key punched Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From 14 ft. to 29 ft., From ft. to ft.				
From				
CDAVEL DAG	Z DETEDMALC.	E 12	A 4- 32	A Error A to A
GRAVEL PACK INTERVALS: From 12 ft. to 32 ft., From ft. to ft.				
From ft. to ft., From ft. to ft.				
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other				
Grout Intervals: From 0 ft. to 12 ft., From ft. to ft., From ft. to ft.				
what is the hearest source of possible contamination:				
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well				
Sewer lines				
Direction from well				e from well
FROM TO	LITHOLOG		FROM	TO LITHO, LOG (cont.) or PLUGGING INTERVALS
		IIC LOO	PROM	TO ETTIO. EOG (COIR.) OF TEOGGING INTERVALS
0 1 Top So			+	
1 32 Gray C	lay, Some Sand		 	
			++	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ✓ constructed, ☐ reconstructed, or ☐ plugged				
under my jurisdiction and was completed on (mo/day/year) .12/3/14				
Kansas Water Well Cont	ractor's License N	lo 890 This	Water Well R	Record was completed on (mo/day/year) 12/50/14
				by (signature)
INSTRUCTIONS: Use type	writer or ball point per	n. PLEASE PRESS FIRML	Y and PRINT of	learly. Please fill in blanks and check the correct answers. Send one copy to
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suit e 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				

http://www.kdheks.gov/waterwell/index.html

LF34-IW04