WATER WELL R		WWC-5		sion of Water			
Original Record		ge in Well Use		rces App. No.		Well ID	
1 LOCATION OF W		Fraction	I	ion Number	Township Numb	1 _~	
County: Sedgwick							
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: □							
Address: 15657830 Pittsburg St. Suite 120							
Address: Well located within McConnell AFB, Wichita, KS							
City: McConnell AFB State: KS ZIP: 67221-3617							
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:25.3 ft. 5 Latitude:							
WITH "X" IN	Depth(s) Groundwater Encountered: 1)						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 Dry Well				Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27		
	WELL'S STATIC WATER LEVEL: ft.				r Latitude/Longitude	:	
	☐ below land surface		■ GPS (unit make/model:Garmin 60c)				
NW NE	above land surface			(WAAS enabled? ■ Yes □ No)			
	Pump test data: Well		☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
W E	after hours pumping gpm Well water was ft.				ne Mapper:	• • • • • • • • • • • • • • • • • • • •	
SW SE	1	rs pumping					
	Estimated Vield: gnm			6 Elevation:ft. Ground Level TOC			
S	Bore Hole Diameter: 8.25 in. to 26.0 ft. and			Source: ☐ Land Survey ■ GPS ☐ Topographic Map			
mile		in. to	. ft.	<u> </u>	Other		
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID							
1. Domestic:		ater Supply: well ID ng: how many wells?					
☐ Household ☐ Lawn & Garden			11. Test Hole: well ID				
Livestock					Geothermal: how many bores?		
2. Irrigation	9. Environmental Remediation: well ID						
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop Surface Discharge Inj. of Water		
4. 🔲 Industrial	☐ Recovery	☐ Injection					
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 diameter 2.0 in to 15.0 ft. Diameter in to							
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)							
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous Slot							
□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)							
SCREEN-PERFORATED INTERVALS: From .25.0 ft. to .15.0 ft., From ft. to ft. to ft.							
GRAVEL PACK INTERVALS: From 26.0 ft. to 12.1 ft., From ft. to ft., From ft. to ft.							
9 GROUT MATERIAL: ■ Neat cement □ Cement grout ■ Bentonite □ Other □ Other □ Comparing the first of the second of of the							
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 ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well							
☐ Other (Specify) Direction from well? Distance from well? ft.							
10 FROM TO	LITHOLO		FROM			PLUGGING INTERVALS	
	Clay	0.0 200	11.0.0			. 2000ii O ii i bii i i i i bi	
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			Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged							
under my jurisdiction and was completed on (mo-day-year) .9/2/20.15 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 710 This Water Well Record was completed on (mo-day-year) .12/3/2015							
under the business name of Below Ground Surface, Inc. 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 1/20/2015							